	CITY OF LOS	ANGELES SP	PEAKER CA	ARD	DNS
YOU ARE N	IS IS A PUBLIC DOCUME IOT REQUIRED TO PROV THE EXTENT NECESSAF	IDE PERSONAL IN	FORMATION IN	ORDER TO	SPEAK, #12
Date 6 - 26-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.			Council File No., Agenda Item, or Case No. 14 - 0020	
I wish to speak before the CHY COVNCIL Name of City Agency, Department, Committee or Council					
Do you wish to provide general Name: <u>SANDY</u> B Business or Organization Affilia	ROWN			the agend	a? 🔾) For proposal () Against proposal () General comments
Address: 16350 Street	WILSHIRE	BL City	LA	CA State	90024 Zip
Business phone:	Represent	ing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AM	ND PROVIDE CLI	ENT INFORMA	TION BEI	_OW:
Client Name:					Phone #:
Client Address:Street		City		State	Zip
Street	for important informatio		antivo acred to th		

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.