## CITY OF LOS ANGELES SPEAKER CARD

NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON "Right to Know

County 0 11-8-16

Departing

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.

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wish to speak before the				
*	Name of City Agency, Departn	ment, Committee or Counc	cil	
Do you wish to provide general pu			agenda?	( ) For proposal
Name: Nemaw	regarding p	ublic safety	/	Against proposal  ( ) General comments
Business or Organization Affiliatio	n: ADVOCACY	4 Life		
Address:		ADA. OY		
Street	City	City of Los Ar	golos	Zip
Business phone:	Representing:	City of Los Al	igeles	= HOMELEYSNE
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROV	IDE CLIENT INFORMAT	ION BELO	w:
Client Name:	Robinhoa	dy Darkni		
Client Address: _ 7515 Pa	acific Boulevard,	Walnut Park,	CA 9	0255

## CITY OF LOS ANGELES SPEAKER CARD

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

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EXCEPT TO THE EXT	ENT NECESSARY FOR THE PRESIDING	OFFICER TO CALL UPON YOU			
Date /1-8-/6	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item or Case No.			
I wish to speak before the					
Nam	e of City Agency, Department, Commit	ttee or Council			
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? (For proposal Against proposal					
Name:		) General comments			
Business or Organization Affiliation:					
Address:		/ _			
Street	City	State Zip			
Business phone:	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:	HIV. 901	Phone #:			
Client Address:	City	State Zip			

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