

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 YOU**

Date 1/17/18

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

Council File No., Agenda Item, or Case No.
Item I 14-0730-SJ

I wish to speak before the Personnel & Animal Welfare
Name of City Agency, Department, Committee 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
 General comments

Name: Lynn Brown

Business or Organization Affiliation: LA. Equine Advisory Committee

Address: 1547 Street N. Sierra Bonita City LA State CA Zip 90046

Business phone: 323-876-4858 Representing: _____

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: _____ Phone #: _____

Client Address: _____
Street City State Zip

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

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Date 1-17-18

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Council File No., Agenda Item, or Case No. Item 1

I wish to speak before the Personnel & Animal Welfare Comm. Hec
Name of City Agency, Department, Committee or Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? For proposal See reverse
 Against proposal
 General comments

Name: Larry Watts

Business or Organization Affiliation: Los Angeles Equine Advisory Committee

Address: 1771 Old Ranch Rd LA CA 90049
Street City State Zip

Business phone: 310-201-5287 Representing: LAEAC

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2018

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Date: 1-17

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Council File No., Agenda Item, or Case No. 1

I wish to speak before the _____
Name of City Agency, Department, Committee 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
(X) General comments

Name: _____

Business or Organization Affiliation: _____

Address: _____
Street City State Zip

Business phone: _____ Representing: _____

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