## CITY OF LOS ANGELES SPEAKER CARD

14-0882-31

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 113 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theNar	me of City Agency, Department, Committee	e or Council
	comment, or to speak for or against a pro	oposal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:		
Address: 5 7 4 7	LavPFC	C91F 9 (60) State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW:
Client Name:		Phone #:
Client Address: Street	ff hill Cy	WOOD 01607

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

## CITY OF LOS ANGELES SPEAKER CARD

Date 1-13-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before theN	ame of City Agency, Department, Committee	or Council	
Do you wish to provide general publi	ic comment, or to speak for or against a prop		
Name:	tric freven		<ul><li>( ) Against proposal</li><li>( ) General comments</li></ul>
Business or Organization Affiliation:			
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
	AID SPEAKER AND PROVIDE CLIENT INF		V:
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.

NOTE: THIS IS A PUBLIC DOCUMENT.

## 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	13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak be		City COUNC.		
	Nar	ne of City Agency, Department, Commi	ittee or Council	
Do you wish to pro		comment, on to speak for or against a		( ) For proposal (L) Against proposal ( ) General comments
Name.	010			A PERIODICAL PROPERTY.
Business or Organ	nization Affiliation:			
Address:	2.	A		
	Street	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF	YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	w:
Client Name:			Pr	none #:
Client Address:	Street	City	State	Zip
	011001	Oity	Oldio	

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