CITY OF LOS ANGELES SPEAKER CARD

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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 (1/20/4		OUNCIL'S RULES OF WILL BE ENFORCED.				Item, or Case		
I wish to speak before the	C.ly Cou					1		
	Name of City Agend	cy, Department, Commit	tee or Cour	ncil				
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal () Against proposal () Deneral comments								
Name: Jaine 6	larcia					reneral comr	nents	
Business or Organization Affiliati	on: Uspile	Association	<u>of</u>	So_	CA	CHAS	ic)	
Address: 515 So T	- guera	City		CA State	9 Zi	00 y		
Address: Street City State Zip Business phone: 213538-000 Representing: LHASC								
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:								
Client Name:					Phone #:	:		
Client Address:		City		01-1-	7.			
Street		(:ITV		State	Zii	Ω		

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

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Date U U	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., 1 1H-137	Agenda Item, or Case No.
	Name of City Agency, Department, Committee	or Council	
Name: Alex Da	public comment, or to speak for or against a prop		For proposal Against proposal General comments
Business or Organization Affiliation	on: VIDT		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOV	w:
Client Name:		Ph	one #:
Client Address:	City	State	Zip