14-1408-51

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Date 06	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	., Agenda Item, or Case No.
I wish to speak before the			
, ,	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general pu	iblic comment, or to speak for or against a pro	oposal on the agenda	() For proposal
Name:Business or Organization Affiliation	AV Y		Against proposal General comments
Address:		01-11-	~p!
	City Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT I	INFORMATION BELC	ow:
Client Name:		P	hone #:
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 August 25, 2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Council	
	Name of City Agency, Department, Committe	ee or Council
Do you wish to provide general p	public comment, or to speak for or against a pi	oposal on the agenda? () For proposal
Name:	yan Barajai	() Against proposal ()—General comments
Business or Organization Affiliati	ion:	
Address:		
Street Business phone:	City Representing:	State Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:		

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I wish to speak before the	or proposal
	or proposal
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For	
	Against proposal General comments
Business or Organization Affiliation:	
Address:Street City State Zi	
Street City State Zi	ip
Business phone: Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	
Client Name: Phone #:	:
Client Address: City State Zin	

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	E CITY COUNCIL'S RULES OF CORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.		
I wish to speak before the				
Name of	City Agency, Department, Committee or	Council		
Do you wish to provide general public comm	nent, or to speak for or against a propos	sal on the agenda? () For proposal Against proposal General comments		
Name:	1	- Contrat comments		
Business or Organization Affiliation:	1000)		
Address: Street	City	State Zip		
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phone #:		
Client Address:	City	State Zip		

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