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CITY OF LOS ANGELES SPEAKER CARD

4-17-55

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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

10 · 14 · 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Homel esthess & Poverty Name of City Agency, Department, Committee		tee
Name:Business or Organization Affilia	public comment, or to speak for or against a propertion: LA CAN		a? () For proposal () Against proposal General comments
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

ITEM#

CITY OF LOS ANGELES SPEAKER CARD

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14-17-55

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Date 10/14/2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
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Do you wish to provide general population of the Name:	ublic comment, or to speak for or against a prop	osal on the agenda? () For proposal () Against proposal General comments
Business or Organization Affiliation	on: <u>N/A</u>	
Address: 8300 S	5. Vermont are LA	CA 900 4 4 State Zip
Business phone: 323-214-		arris-Dawson
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name: NA		Phone #:
Client Address: \text{\lambda} / .	A City	State Zip

17BM#

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Date 14-Det-2015 I wish to speak before the Hom	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	(i) 14.	Agenda Item, or Case No.
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Name:	1	0	
Business or Organization Affiliation: _	1/ENICE TUST	Cor Con	milles
Address: Street	2881 1/Enics	COA 9	20294 Zip
Business phone:	Representing:		
	D SPEAKER AND PROVIDE CLIENT INI		N:one #:
Client Address:Street	City	State	Zip

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Date 10/14/06/5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	AGCUSS & POUGH CON Name of City Agency, Department, Committee or	Council
Do you wish to provide general pu	ublic comment, or to speak for or against a propos	
Name: GENER	AL 7644	() Against proposal () General comments
Business or Organization Affiliation	ISSUES AND SOLUTTO	C4C
Address: 1626 N. W.	-00/ AUG. #924 HOLLYVOO	N 00 Jan 38
Business phone: 333.445	Representing: SHS RW R	State Zip
	PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

Wam#1

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Name:		Soha WA	L5H		Against proposal General comments
Business or Organi	zation Affiliation				
Address:	Street	City	Sta	te Z	lip
Business phone: _		,			
CHECK HERE IF	YOU ARE A F	PAID SPEAKER AND PROVIDE CL	IENT INFORMATION	N BELOW:	
Client Name:				Phone #	<u> </u>
Client Address:					
	Street	City	Sta	te Z	lip

175M#

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Business phone:	Representing:		
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