

# CITY OF LOS ANGELES SPEAKER CARD

*Out of time  
DNS*

**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 6/8

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

Council File No., Agenda Item, or Case No.  
# ~~15~~ 46

I wish to speak before the City Council #15-0002-5184  
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  
Name: S O W WALSH ( ) General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: LA  
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: \_\_\_\_\_  
Street City State Zip

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Council File No., Agenda Item, or Case No.  
**46**

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  
Name: **The RedChelf** ( ) General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Date 6/8/16

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

Council File No., Agenda Item, or Case No. 96

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  
Name: my Name  General comments

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Client Address: \_\_\_\_\_  
Street City State Zip

\_\_\_\_\_ to the presiding officer or chairperson.