## 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 5-8-2015	THE CITY COUNCIL'S RU		Council File No., A	agenda Item, or Case No.
I wish to speak before the	gears-s			,
	ame of City Agency, Departmen			
Do you wish to provide general publ	ic comment, or to speak for or a	gainst a prop	osal on the abenda?	For proposal
Name: how hom			( her.	Against proposal  ( ) General comments
Business or Organization Affiliation:	Venice bei	ach		
Address:				
Street	City <b>p</b>	u.blic	Interes	MEDA
Business phone:	Representing:	10.16	made	71207
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE	CLIENT IN	ORMATION BELOW	1.
		11-11		
Client Name	ver The City	1111		one #:
Client Address:	our risht	5 fr	-	m Act
Street	lations City		State	Zip
Please see reverse of card for in	nportant information and submit	this entire ca	rd to the presiding off	cer or chairperson.

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Name of City Agency, Department, Committee of Council  Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal Name:  Business or Organization Affiliation:  Address:  Street  City  State  Zip	osal
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal Name: ( ) Against public comment ( ) General Business or Organization Affiliation:	osal
Name: ( ) Against processes or Organization Affiliation:	osal
Name: ( ) General  Business or Organization Affiliation:  Address:	aronocal
Address:	
Street City State Zip	
Business phone: Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	
Client Name:	
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.