15-0218-58

## 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 9/2/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.				
I wish to speak before the	Name of City Agency, Department, Comm	nittee or Council			
Do you wish to provide ge	neral public comment, or to speak for or against a	proposal on the agenda? ( ) For proposal ( ) Against proposal			
Name:	In freuen	( ) General comments			
Business or Organization		Billbards/LADD			
Address:Street	City	State Zip√			
Business phone:	Representing:	3.9M			
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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Date    Wish to speak before the		#36	., Agenda Item, or Case No.
	Name of City Agency, Department, Committe	ee or Council	
Do you wish to provide general pu	ublic comment, or to speak for or against a pr	oposal on the agenda	? ( ) Før proposal
,	ald relations		( Against proposal
Name:	opr viilsy		( ) General comments
Business or Organization Affiliatio	n:		
	/ <sub>6</sub> A.		
Address: Street	City	State	Zìp
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	DW:
Client Name:			hone #:
Olicia Indille.			HUHO #.
Client Address:			
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No. Agenda Item, or Case No.		
I wish to speak before the				
	ame of City Agency, Department, Committee comment, or to speak for or against a prop	X		
Address:Street	City	State Zip		
/	Representing:	<u></u>		
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Client Name:		Phone #:		
Client Address:Street	City	State Zip		

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Do you wish to provide general pub Name:  Business or Organization Affiliation:	olic comment, or to speak for or against a p	proposal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments		
Address: Street				
Street	City	State Zip		
Business phone:	Representing:			
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Client Address:	City	State Zip		