

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 4/15/15

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

Council File No., Agenda Item, or Case No.
#34/BF146090 / 15-0317

I wish to speak before the Council
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
() General comments

Name: Cody Penwell

Business or Organization Affiliation: Resident - Self

Address: 4043 Pacheco Dr. Sherman Oaks Ca 91403
Street City State Zip

Business phone: _____ Representing: Self - Neighborhood

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: _____ Phone #: _____

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 4-15-15

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

CC

Council File No., Agenda Item, or Case No. 34

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: Juan Alcalá () General comments

Business or Organization Affiliation: _____

Address: _____
Street City State Zip

Business phone: _____ Representing: _____

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I

Date
April 15, 2015

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

Council File No., Agenda Item, or Case No.
15-0317, Item 34

I wish to speak before the LA City Council
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
 General comments

Name: Svetlana Molchanov

Business or Organization Affiliation: Herself

Address: 3923-3941 v. Hopevale Dr.
Street City State Zip

Business phone: _____ Representing: Herself

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Client Address: _____
Street City State Zip

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