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	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
6-27-17	DECORUM WILL BE ENFORCED.	2
I wish to speak before the	Name of City Agency, Department, Commit	tee of Council
Do you wish to provide general	al public comment, or to speak for or against a p	proposal on the agenda? () For proposal
Name:		() Against proposal () General comments
Business or Organization Affili	ation:	
Address:	mona city a	MINZ State Zip
Business phone:	Representing:	State ZIP
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	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
1-14-1	DECORUM WILL BE ENFORCED.	2
I wish to speak before the	La Angles Economi	e Dere Gorat
Λ	Name of City Agency, Department, Committee or	Council Commission
Do you wish to provide general	public comment, or to/speak for or against a proposa	al on the agenda? () For proposal () Against proposal
Name: Y LON VC	MORIO HILTEX	() General comments
Business or Organization Affiliati	ion:	1
Address: Street	SONS Pry State	State Zip 9/D7
Business phone: Record	S (Representing: Sty	State / Zip 9000
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
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