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 / 1 / 1 4	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general p	public comment, or to speak for or against a prop	osal on the agenda	? () For proposal () Against proposal
Name:	Ohn WALSA		() General comments
Business or Organization Affiliati	on:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	OW:
Client Name:		F	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 10-1	4-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak befo		Name of City Agency, Department, Committee of	r Council	
Do you wish to prov	vide general pul	blic comment, or to speak for or against a propos	sal on the agenda?	() For proposal
Name:		Antonia Lon	MRZ	() Against proposal () General comments
Business or Organia	zation Affiliation	i:		
Address:				
Address:	Street	City	State	Zip
Business phone:		Representing:		
		PAID SPEAKER AND PROVIDE CLIENT INFO		w:
Client Name:			PI	none #:
Client Address:				
	Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No.	Agenda Item, or Case No.
16,19	DECORUM WILL BE ENFORCED.	(35
I wish to speak before the			
- Wish to opean before the	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general pu	ublic comment, or to speak for or against a pro	posal on the agenda?	() For proposal
Name	a Manna		() General comments
Name:	VUVXIU	-	()
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CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	AFORMATION BELO	vv:
Client Name:		Pr	none #:
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