

CITY OF LOS ANGELES SPEAKER CARD

DUS
15-1226-51

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
5-11-16

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

L A C C

Council File No., Agenda Item, or Case No.
CF 1226 51 agenda # 5

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
 General comments

Name: William Kuzmin

Business or Organization Affiliation: _____

Address: _____
Street City State Zip
Granada Hills CA 91345

Business phone: 818-634-5344 Representing: SEA

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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DMS

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Date
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**THE CITY COUNCIL'S RULES OF
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Council File No., Agenda Item, or Case No.
5(2)

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
() General comments

Name: Linda Romney

Business or Organization Affiliation: _____

Address: 17828 TRIBUNE St. Granada Hills, CA. 91344
Street City State Zip

Business phone: 818 363 3528 Representing: Trustee Rep. OWNER

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Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal
() Against proposal
Name: Linda Romney () General comments

Business or Organization Affiliation: _____

Address: 17828 ~~XX IN RED LINED AREA~~ TRIBUNE St. Granada Hills, CA 91344
Street City State Zip

Business phone: 818 363 3528 Representing: TRUSTEE Rep. OWNER

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

Client Name: _____ Phone #: _____

Client Address: _____
Street City State Zip