APPELLANT'S REPRESENTATIVE

10 Minutes CITY OF LOS ANG

Yognost's, NOTE: THIS IS A PUBLIC DOCUMENT.

## CITY OF LOS ANGELES SPEAKER CARD

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Date 7/1/2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	C:fy Counci ( Name of City Agency, Department, Committee o	r Council
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenda? ( ) For proposal
Name: Daniel	Wright	Against proposal ( ) General comments
Business or Organization Affiliati	on: Silverstein Law Fire	
Address: 215 N. M	9200 Representing: La Minda Ave,	or A 91101
Business phone: (426) 449-	9200 Representing: La Minde Ave	Weighburhood Asson of Holywood
CHECK HERE IF YOU ARE A		DRMATION BELOW:
Client Name: La Mir	wha Auc. Noighborhood Asses	f Hollywood Phone #: 449-4200
Client Address: 2/5 N. Street	Massays Ave. 3d fl. Por	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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July J, 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
wish to speak before the	Name of City Agency, Department, Commi	ttee or Council
Do you wish to provide general p	oublic comment, or to speak for or against a	oroposal on the agenda? ( ) For proposal (X) Against proposal ( ) General comments
Business or Organization Affiliati	on:	
Address: 1950 N -	SERRANO ARE LA	CA 9027 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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EXOCITIO IIIE	EXTENT NEOLOGANI TON THE THEODING OF	THOEIT TO GALL OF	W 100	
July 1, 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	Council File No., 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 pub	olic comment, or to speak for or against a prop	oosal on the agenda	( ) For proposal	-1
Name: Doug	HAINES		( ) Against propos ( ) General commo	
	LA MIRADA Ave.		•	N,
Address: RO. B	$0 \times 9359c$ LF	7 900	93	
		State	Zip	
Business phone: 300 281-7	625 Representing:			
CHECK HERE IF YOU ARE A P	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:	
Client Name:		P	hone #:	
Client Address:	Oth	04-4-	7:	
Street	City	State	Zip	

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.