16-0160-5361

## 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 6 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	Name of City Agency, Department, Committee of	or Council	
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda	a? ( ) For proposal
Name: Donna Thu	mp		( ) Against proposal     ( ) General comments
Business or Organization Affilia	tion:		
	4)		
Address:	011		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date	THE OLTY COUN	1011 10 DUI E0 OE	Council File No. A	genda Item, or Case No.
6-7-2016		ICIL'S RULES OF . BE ENFORCED.	14	genda nem, or oase no.
I wish to speak before the	City Coo	epartment, Committee o	or Council	
Do you wish to provide general p	public comment, or to spea	ak for or against a propo	sal on the agenda? (	) For proposal
Name: PATRICK	FLANNERY		(	) Against proposal ) General comments
Business or Organization Affiliati	on:			
Address: 18141 Street	RAYEN ST	NORTHRIDG City	E State	9/325 Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND	PROVIDE CLIENT INF	ORMATION BELOW	:
Client Name:			Pho	ne #:
Client Address:				
Street		City	State	Zip

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I wish to speak before the	Name of City Agency, Department, Committee o	r Council
Do you wish to provide general pu	ublic comment, or to speak for or against a propos	sal on the agenda? ( ) For proposal ( ( ) Against proposal
Name:	70 Mr M& 1/1	( ) General comments
	ha WALSH IS	
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 7/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	r Council
Do you wish to provide general Name: DOC RIVEN	Il public comment, or to speak for or against a propos	sal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affilia Address: 24255 Street Business phone: (3(0)536	ention:  Chafty Ave Hav but at a city  Representing: The Jumps	) OS . G0710 State Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

# DNS

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Date 6/7/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	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 genera	al public comment, or to speak for or against a propo	osal on the agen	
Name: Varcely	1 Jameson		( ) Against proposal     ( ) General comments
Business or Organization Affilia	ation:		
Address: 24255 SU	raper live Hastor City	A	90916
Business phone: (3,0)52	9-75 Representing:	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BE	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip