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

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Date 6/28/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	a, Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	or Council	A A G = 1
Do you wish to provide general	public comment, or to speak for or against a propo	isal on the agenda	? (X) For proposal () Against proposal () General comments
Business or Organization Affiliat Address: 1370 M Street	spins Point In # 522 mount of	dry Csl State	90292 Zip
Business phone: 13618	Representing: Appulant A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION 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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I wish to speak before the	Name of City Agency, Department		ouncil	1
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Business or Organization Affiliati	on: OWNER OF	1320 a.	JIN TERO	86
Address: 7500	DEVISTA DR	COS AWG	FELBS, CA'	20048
Business phone: 310.96	3.796 Representing:	SEL	State	Zip
CHECK HERE IF YOU ARE,	A PAID SPEAKER AND PROVID	E CLIENT INFOR	MATION BELOW:	
Client Name:			Phone	e #:
Client Address:	City		State	Zip

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