CITY OF LOS ANGELES SPEAKER CARD

16-0326

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 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 /	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	Agenda Item, or Case No.
·	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general pu	ublic comment, or to speak for or against a proposa	al on the agenda?	() For proposal () Against proposal () General comments
Name:	NMDOG		() General comments
Business or Organization Affiliation	n:	_	
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	w:
Client Name:		PI	none #:
Client Address:	City	State	Zip
Street	City	Sidle	∠ıµ

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

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Date Solution Sol	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Commit	Council File No., Agenda Item, or Case No. ###################################			
Do you wish to provide general pub. Name:	olic comment, or to speak for or against a p	() Against proposal			
Business or Organization Affiliation: Address:	:				
Business phone:	City Representing:	State Zip			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Phone #:			
Client Address:	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 4,15,16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Special	
	Name of City Agency, Department, Committee	ee or Council
Do you wish to provide general r	public comment, or to speak for or against a pro	oposal on the agenda? () For proposal
Name:	Clylle Jum ENC	Against proposal () 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 I	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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