

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 12/12/16

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

Council File No., Agenda Item, or Case No.
1) 16-0703

I wish to speak before the HEALTH, MENTAL HEALTH, & EDUCATION COMMITTEE
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: MARCOS RODRIGUEZ

Business or Organization Affiliation: LOS FELIZ NEIGHBORHOOD COUNCIL / ASI CAL STATE LA

Address: 5754 GATEWAY DR. LA CA 90032
Street City State Zip

Business phone: 323.343.4785 Representing: _____

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.