CITY OF LOS ANGELES SPEAKER CARD

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YOU ARE NOT REQU	IBLIC DOCUMENT SUBJECT TO POSTING ON JIRED TO PROVIDE PERSONAL INFORMATION ENT NECESSARY FOR THE PRESIDING OFFICE	I IN ORDER TO	SPEAK, //			
Date 06 17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council Eile N	o., Agenda item, o Case No.			
wish to speak before the						
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						
Name:			General comments			
Business or Organization Affiliation:	HOMELESS V	VHR				
Address:						
Street	1 City - 22 al 2005	State	1 Zip			
Business phone:	Representing:	- CV I	5654			
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.

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NOTICE OF LOBBYING REGISTRATION

If you are receiving compensation to make this appearance, the City's municipal lobbying ordinance (L.A.M.C. Section 48.01 et seq., as amended) may require you to register and report your lobbying activity. For more information about the City's lobbying law, contact the City Ethics Commission at (213) 978-1960, by fax at (213) 978-1988 or at 200 North Spring Street, 24th FI – City Hall, Los Angeles, CA 90012.

Information about lobbying the City of Los Angeles may also be found on the Internet by accessing the Ethics Commission site on the City of Los Angeles "home page" at http://ethics.lacity.org



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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 Wish to speak before the _	DECOR	TY COUNCIL'S RULES OF THE PROPERTY OF THE PROP	D.	No., Agenda Item, or Case No.		
Do you wish to provide general public formment, or to speak for or against a proposal on the agenda? () For proposal						
Name:Business or Organization Af		PUPPET		() Against proposal () General comments		
Address:Street		City	State	Zip		
Business phone:	Repr	resenting:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:	Hugo	ROSSITICR'S	HSShole	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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