CITY OF LOS ANGELES SPEAKER CARD

NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSEL.
YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER
EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL YOU YOU

| LO / O | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No. | 17-1434 |
|-----------------------------------------------|-------------------------------------------------------|------------------|----------------------------------------------------|
| I wish to speak before the | and of City Agonoy Donostroont Committee | v Council | |
| Do you wish to provide general publi Name: | ame of City Agency, Department, Committee o | | For proposal () Against proposal General comments |
| Address:Street | City | State | Zip |
| Business phone: | Representing: | | |
| CHECK HERE IF YOU ARE A PA | ID SPEAKER AND PROVIDE CLIENT INFO | ORMATION BELO | w: |
| Client Name: | | PI | hone #: |
| Client Address: | City | State | |

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| Date (O S | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No. Agenda Item, or Case No. |
|--------------------------------------|-------------------------------------------------------|----------------------------------------------|
| | Name of City Agency, Department, Committee | ee or Council |
| Do you wish to provide general pu | ıblic comment or to speak for or against a pr | oposal on the agenda? () For proposal |
| Name: | Fire Wheren | () Against proposal () General comments |
| Business or Organization Affiliation | n: | |
| A 4.1 | V | |
| Address:Street | City | State Zip |
| | Representing: | |
| • | PAID SPEAKER AND PROVIDE CLIENT | |
| Client Name: | | Phone #: |
| Client Address: | | |
| Street | City | State Zip |



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| Date 116 / 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 |
| | public comment, or to speak for or against a propo | sal on the agenda? (For proposal) Against proposal |
| Name: TOO CT Business or Organization Affiliation | -amboa | () Conoral comments |
| Business or Organization Affiliati | ion: UFLAC | |
| Address:Street | | |
| Street | City | State Zip |
| Business phone: | Representing: | |
| CHECK HERE IF YOU ARE A | A PAID SPEAKER AND PROVIDE CLIENT INFO | DRMATION BELOW: |
| Client Name: | | Phone #: |
| Client Address: | • | |
| Street | City | State Zip |

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| I wish to speak before the | | | |
| | Name of City Agency, Department, Committee | or Council | |
| Name: Frank I | blic comment, or to speak for or against a prop | osal on the agenda | ? (Eor proposal () Against proposal () General comments |
| Address:Street | City | State | Zip |
| Business phone: | Representing: | | |
| CHECK HERE IF YOU ARE A | PAID SPEAKER AND PROVIDE CLIENT IN | FORMATION BELO | ow: |
| Client Name: | | P | Phone #: |
| Client Address: | | | |
| Street | City | State | Zip |