

CITY OF LOS ANGELES SPEAKER CARD

Date

9/3/08

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

Council File No., Agenda Item or Case No.

08-1554

2

I wish to speak before the

APHA

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:

Robert Berger

Business or Organization Affiliation:

Healthier Solutions

Address:

1606 Argyle Ave #205 LA

CA

90028

Street

City

State

Zip

Business phone:

323 468 8900

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.

NOTE: THIS IS A PUBLIC DOCUMENT.

CITY OF LOS ANGELES SPEAKER CARD

Date 9/3/08

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

Council File No., Agenda Item, or Case No. 4
08-1584 # 2

I wish to speak before the ARTS, PARKS HEALTH + AGING
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: ESTHER SCHILLER

Business or Organization Affiliation: S.A.F.E. SMOKE FREE AIR FOR EVERYONE

Address: 10722 WHITE OAK AVE #5, GRANADA HILLS, CA 91344
Street City State Zip

Business phone: 818/363-4220 Representing: _____

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Client Address: _____
Street City State Zip

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Council File No., Agenda Item, or Case No. ⁴
08-1584 # 2

I wish to speak before the arts, parks, health, + aging
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: Erica Halchak

Business or Organization Affiliation: American Lung Association

Address: _____
Street City State Zip

Business phone: _____ Representing: _____

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Client Address: _____
Street City State Zip

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Date

9-3-08

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

Council File No., Agenda Item, or Case No.

#2 08-1544

I wish to speak before the

Arts, Parks, Health & Aging Cmte

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:

DAVID ROSS

Business or Organization Affiliation:

American Heart Assn.

Address:

816 S. Figueroa St., LA, CA 90017

Street

City

State

Zip

Business phone:

213-291-7000

Representing:

American Heart.

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name:

Phone #:

Client Address:

Street

City

State

Zip

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9-3-08

THE CITY COUNCIL'S RULES OF
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Council File No., Agenda Item, or Case No.

~~# 2 + 3~~ # 1

07-1790 #1

08-1544 #2

APHA

I 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

() General comments

Name: Monty Messer

Business or Organization Affiliation: LA County Public Health Tobacco Center

Address: _____
Street City State Zip

Business phone: _____ Representing: _____

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: _____ Phone #: _____

Client Address: _____
Street City State Zip

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Date

9/3/08

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Council File No., Agenda Item, or Case No.

122

07-1790 #1

08-1544 #2

I wish to speak before the

Arts, Parks, Health and Aging 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: Alisha Lopez

Business or Organization Affiliation: Coalition for a Tobacco Free LA County

Address: 6801 Coldwater Canyon Ave. No. Hollywood CA 91605

Street

City

State

Zip

Business phone: (818) 301-6311 Representing:

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Client Address:

Street

City

State

Zip

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Council File No., Agenda Item, or Case No.
1 and # 2

07-1790 #1
08-1544 #2

I wish to speak before the ACTS, TASKS HEALTH + FINANCE
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
Name: RITA FERELITAN () Against proposal
() General comments

Business or Organization Affiliation: Liga Latina

Address: 3580 Wilshire Bl, LOS ANGELES, CA 90010
Street City State Zip

Business phone: 213 365-7965 Representing: _____

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