					a constraint in the second second
С	ITY OF LOS	ANGELES SP	EAKER CA	ARD IC	1-0943-51
YOU ARE NOT I	A PUBLIC DOCUME REQUIRED TO PROV EXTENT NECESSAF	IDE PERSONAL INI	FORMATION IN	ORDER TO	SPEAK,
Date	DECORUM	VILL BE ENFORCE		# 8	o., Agenda Item, or Case No.
Do you wish to provide general pub Name: Business or Organization Affiliation:	Jeha	,			a?()For proposal ()Against proposal ()General comments
Address:	L.A.	0			
Street		City	н. -	State	Zip
Business phone:	Represent	ing:			
CHECK HERE IF YOU ARE A P Client Name:	AID SPEAKER AN	ND PROVIDE CLI	ENT INFORMA		OW:
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.

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 Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. 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: Business or Organization Affiliation. 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

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

	CITY OF LOS ANGELES SPEAKER	CARD	DNS	
YOU ARE NOT	S A PUBLIC DOCUMENT SUBJECT TO POSTING O TREQUIRED TO PROVIDE PERSONAL INFORMATION E EXTENT NECESSARY FOR THE PRESIDING OFF	ON IN ORDER TO S	PEAK,	
Date (0.30.2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Council File No., Agenda Item, or Case No. $#84$	
I wish to speak before the	BAJ ZARRAY, Myur C. A. Tan Name of City Agency, Department, Committee o	r Council		
	ublic comment, or to speak for or against a propos	sal on the agenda	? (/) For proposal () Against proposal () General comments	
	n:			
Address:	City	State	Zip	
	Representing:			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELC	ow:	
Client Name:		P	hone #:	
Client Address:Street	City	State	Zip	
Please see reverse of card fo	r important information and submit this entire card	to the presiding a	officer or chairperson	