

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

Nov. 1, 2016

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

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

#0 16-1092

I wish to speak before the

IGT CTC

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: ANA CUBAS

Business or Organization Affiliation:

Vanir, Vanir ASL

Address:

Street

600 Wilshire Blvd. Suite 870, Los Angeles CA 90022

City

State

Zip

Business phone: 213-434-6332

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.

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Date

11-1-16

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

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

8

I wish to speak before the

Transpation Subcommittee

16-1092

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: *Kurt Schwager*

Business or Organization Affiliation: *Jacobsen / Dankes Associates*

Address: *653 Century Blvd. (Sky View)* *LA* *CA*
Street City State Zip

Business phone: *314-713-1319* Representing: *J/D*

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

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Client Name: *LAWA* Phone #: _____

Client Address: *LAX* *LA* _____
Street City State Zip

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