	CITY OF LOS ANGELES SPEAKE	R CARD	/ <del>#</del> -	
Date 7-20-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, 4-05-185		
I wish to speak before the	Public Work   Budget Name of City Agency, Department, Committee			
Do you wish to provide general Name: 4/enn	public comment, or to speak for or against a prop	osal on the agenda? ( ) For pro Agains ( ) Genera	posal st proposal al comments	
Business or Organization Affiliat	Balley tion: Encomo Neighbork	ood Gunal R	Avea 1 epresent.	
Address: Street	City	Staţe Zip		
Business phone: 818-453-340 Representing: Glenn Bailey SFVO yoko 0, con				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phone #:		
Office Address of				

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

State

Zip

City

Street

NOTE: THIS IS A PUBLIC DOCUMENT.

## CITY OF LOS ANGELES SPEAKER CARD

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

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	05-1853-51
I wish to speak before the PUBLIC WING & BUBGET OF Name of City Agency, Department, Committee or	FWANCE
Do you wish to provide general public comment, or to speak for or against a proposa	I on the agenda? ( ) For proposal
Name: BARAY MELES	( ) General comments
Business or Organization Affiliation: STVAL CITY AFSITEMTS	DG4N.
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CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Date

Client Name: Phone #:

Client Address:
Street City State Zip

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## CITY OF LOS ANGELES SPEAKER CARD 05-185 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 Business or Organization Affiliation: LA32 NC Address: \_\_\_\_\_Street Business phone: \_\_\_\_\_ Representing: \_\_\_\_ CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address: Street

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