CITY)F LOS ANGELES SPEAKER 'ARD

Date 8/21/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the	ersonnel and Animal We	1 faire Committee	
	Name of City Agency, Department, Committee or C	Council	
3	public comment, or to speak for or against a proposa	I on the agenda? () For proposal () Against proposal	
	Canning	() General comments	
Business or Organization Affiliat	ion: let Industry Joint	Harisory Council	
Address: 1146 19 to Street	St NW Washington City L 1525 Representing: Pet industry	DC 20036 State Zip	
Business phone: <u>202453</u>	1575 Representing: Plt industry	}	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:	
Client Name:		Phone #:	
Client Address:			
Street	City	State Zip	
Please see reverse of card	for important information and submit this entire card t		
	NOTE: THIS IS A PUBLIC DOCUMENT.		
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	CITY OF LOS ANGELES SPEAKER	CARD	
Date		Council File No., Agenda Item, or Case No.	
8-21-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	#6-PET STORES	
I wish to speak before the	Name of City Agency, Department, Committee or C	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: Projects Control of the Contro			
Business or Organization Affiliation: All Assucs Mumb			
Address: Street, State Zip			
Business phone: 213/413-2367 Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		Phone #:	
Client Address:		Olada 7in	
Street	City	State Zip	

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CITY)F LOS ANGELES SPEAKER ARD

Date 8 3 11 1 >-	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Anima Welfare Countlee Name of City Agency, Department, Committee or	Council
Do you wish to provide general	public comment, or to speak for or against a proposa	on the agenda? (V) For proposal
Name: Tina Cl	ark	() Against proposal () General comments
Business or Organization Affiliat	tion:	
Address: 1714 8.	Chery Chase Dr. Apt B GI	enaals, (A 9170-6 State Zip Zip
•		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
	for important information and submit this entire card t	, .
	CITY OF LOS ANGELES SPEAKER (
Date 6/2//12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
wish to speak before the	Name of City Agency, Department, Committee or C	Council
Do you wish to provide general p	public comment, or to speak for or against a proposal	on the agenda? (X) For proposal
Name: MATT BRUC	5	() Against proposal () General comments
Business or Organization Affiliati	on: PETA	
	1. SUNSET BLUD, LOS ANGELES	CA 90026
0,100,1	6487 Representing: PETA	. State , 71h
	PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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CITY)F LOS ANGELES SPEAKER 'ARD

Aug 21. 2012	THE CITY COUNCIL'S F			Agenda Item, or Case No.
I wish to speak before the	Personell + /- Name of City Agency, Departm	Wind We lent, Committee or C	Have	
Do you wish to provide general p	public comment, or to speak for o	r against a proposal	on the agenda?	() For proposal () Against proposal
Name: ED BU	NCK			() General comments
Business or Organization Affiliation	on: SC golde	n Ret R.	escont	
Address: 1234 A	V. LAUREL#17 U	1H CA	State	700 46
Business phone:				
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVI	DE CLIENT INFOR	MATION BELOV	v: .
Client Name:			Ph	one #:
Client Address:Street	City		Chata	710
	•		State	Zip
Please see reverse of card to	or important information and sub NOTE: THIS IS A PUI		the presiding of	ficer or chairperson.
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	CITY OF LOS ANGELE	S SPEAKER (CARD	
Date 8/2 / //2 -	THE CITY COUNCIL'S R		Council File No., A	genda Item, or Case No.
) / / D	ASWA AND A) Name of City Agency, Departm	NMAZ M ent, Committee or C	CLPMC (ouncil	annithe (PAW)
Do you wish to provide general p	ublic comment, or to speak for or	against a proposal	on the agenda?	For proposal
Name: TENNIFER	PERBAGON			Against proposal General comments
Business or Organization Affiliation	on:			1
Address: 894 Beve	estrator of Los	(Aylis	A	96034
Business phone 16-28-5	$\mathbb{Z}_{\mathbb{Z}}^{\mathbb{Z}}$ Representing: \mathbb{M}	yself Aws	Defenset	is Mimmers
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVID	/ /	MATION BELOW	<i>i</i> :
Client Name:			Pho	one #:
Client Address:Street	City		State	Zip

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CITY)F LOS ANGELES SPEAKER ARD

Date 8/2/

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

Council File No., Agenda Item, or Case No. 11 - 0754/6

I wish to speak before the		·
N	lame of City Agency, Department, Committee	or Council
Name: Date Bart		() Against proposal () General comments
Business or Organization Affiliation:	Humane Soady of the	United States.
Address:Street	City	State Zip
	Representing:	•
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State , Zip
	mportant information and submit this entire can NOTE: THIS IS A PUBLIC DOCUMENT FY OF LOS ANGELES SPEAKER	NT.
Date (2/2)	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the No	ame of City Agency, Department, Committee of	Lace or Douncil
Do you wish to provide general publi Name: Talta Shenks	c comment, or to speak for or against a propo	sal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation:		
Address: 971 Gmehan Street Business phone: 3/0 259-8	ted Way Painfie Pa 377 Representing:	Usades CA 90272 State) Zip
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
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CITY F LOS ANGELES SPEAKER ARD

8/24/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
/ / I wish to speak before the	Anmal Welfare Com no Name of City Agency, Department, Committee of	
, A A	public comment, or to speak for or against a propo ALALANO	() Against proposal
Business or Organization Affiliat	ion:	
Address:	8 PO BOX 2705 M	MU Ca POSYY State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State , Zip
Please see reverse of card f	for important information and submit this entire care	d to the presiding officer or chairperson.
	NOTE: THIS IS A PUBLIC DOCUMEN	
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	CITY OF LOS ANGELES SPEAKEF	RCARD
Date 8/21/2012	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Per	ronal and animal Wall Name of City Agency, Department, Committee o	lore Commettees
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenda? () For proposal
Name: Sylvia N	Miller	() Against proposal () General comments
, Business or Organization Affiliati	on: Private Citizen	
Address: 185 Long	ley Way, Arcadia	CA 91007 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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CITY)F LOS ANGELES SPEAKER 'ARD

Date THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the	0	
Name of City Agency, Department, Committee or		
Do you wish to provide general public comment, or to speak for or against a propose		
Name: Judie Mancuso	() General comments	
Name: Judie Mancuso Business or Organization Affiliation: Social Compassion In	U Legislation	
Address:		
Street City Business phone: Representing:	State Zip	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO		
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Client Name:	Phone #:	
Client Address: City	State Zip	
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Date S/2/12 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the Personal and Animal Welfere Committee Name of City Agency, Department, Committee or Council		
Do you wish to provide general public comment, or to speak for or against a proposa	, , , ,	
Name: Barbara Wilson	() Against proposal () General comments	
Business or Organization Affiliation: Private Citizen		
Address: 3139 N. Mt. Curre ave altahena	CA 9100 (State Zip	
Business phone: Representing: Set	,	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:	
Client Name:	Phone #:	

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City

State

Client Address: ____