## CITY OF LOS ANGELES SPEAKER CARD

DN8 15-0595

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

9-9-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide genera	al public comment, or to speak for or against a propo	osal on the agenda?	( ) For proposal
Name:	Antonia Jamire	2	Against proposal     General comments
Business or Organization Affilia	ation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INF		
Client Name:		Ph	one #:
Client Address:	City	State	Zip
Ollect	City	State	21P

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



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Date / /	THE CITY COUNCIL'S RULES OF		lo., Agenda Item, or Case No.
9/9/15	DECORUM WILL BE ENFORCED.	15-0595	#14 on agenda
I wish to speak before the Cp	ty Council		
	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general p	public comment, or to speak for or against a prop	oosal on the agend	a? ( ) For proposal  ( ) Against proposal 54  General comments
Name: ARPVIN PI	FZMavrice		_ General comments
Business or Organization Affiliati	on:		
Address: 864 Hy	OPKION Ave., LA CA	90029 State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 9/9/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the A	me of City Agency, Department, Committee	or Council
Do you wish to provide general public  Name: Sound Made	comment, or to speak for or against a prop	osal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:		
Address: <u>863</u> Hyper:	is Auc LA	State Zip E Neighbor Association
Business phone:	Representing: Hyperion Au	e Neighbor Association
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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