

CITY OF LOS ANGELES SPEAKER CARD

15-0811, 15-0814,
15-0741, 15-0741-51

**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 7/28/2013

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

Council File No., Agenda Item, or Case No.
33

I wish to speak before the _____

TOM LABONGE
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

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Date

7-28-15

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

33

I wish to speak before the

CITY COUNCIL

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

(X) General comments

Name: ALEXANDER VON WECHMAR

Business or Organization Affiliation: THE OAKS AND BRONSON CANYON IMPROVEMENT

Address: 2360 CANYON DR., LOS ANGELES, CA 90068 FUND
Street City State Zip

Business phone: (323) 467-9004 Representing:

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

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Client Address: Street City State Zip

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() Against proposal

() General comments

Name:

ROBERT YOUNG

Business or Organization Affiliation:

OAKS HOMEOWNERS ASSOCIATION

Address:

2419 PARK OAK DR.

L.A.

CA

90068

Street

City

State

Zip

Business phone:

Representing:

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

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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
7/28/2015

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() Against proposal
(x) General comments

Name: LINDA OTHENIN-GIRARD

Business or Organization Affiliation: CLARKS HOMEOWNERS ASSOCIATION

Address: 2469 WILDBAK DR. LOS ANGELES CA 90068
Street City State Zip

Business phone: 323-467-7702 Representing: _____

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Client Address: _____
Street City State Zip