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Date 8 - 28 - 13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the	Comar	11-0	923
·	Name of City Agency, Department, Committee or	Council	,
Do you wish to provide genera	l public comment, or to speak for or against a propos		() Against arabasal
Name:	Annow SACUS		() General comments
Business or Organization Affilia	ation:		
Address:	ben nox		
Address:Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Name:		P	hone #:
Client Address:	City	State	Zip

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Date & -28 - 13	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 general p	public comment, or to speak for or against a prop	osal on the agenda? (For proposal
Name: CARUS	CALLE/O	() Against proposal () General comments
Business or Organization Affiliation	on: ARTIST	
Address: 4657 6	leason st Cos An	seles of 900ez
Business phone: 323-9/5-	City ,	State Zip C.A. Cut154
	• 1	FORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
8/28	DECORUM WILL BE ENFORCED.	47	
	Chy Comil		
I wish to speak before the	City Council		
2,	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general	public comment, or to speak for or against a prop	oosal on the agenda?	() For proposal
Name:	5 In WALSH		Against proposal General comments
Business or Organization Affiliat	tion;		
Address:			
Street	City	State	Zip
Business phone:	Representing:		[
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOV	v:
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Street	City	State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 8-26-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No स्	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	or Council	
Do you wish to provide general p	public comment, or to speak for or against a propo	sal on the agenda	? () For proposal
Name: CMAR R	4000in -		() Against proposal General comments
Business or Organization Affiliation	on: Peace Please Organ	ikaton_	
Address:Street	City	State	710
*****	•		Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip

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Business or Organization Affiliation: ACADSMIN AVAVCE		1	,	
I wish to speak before the	Date	THE CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
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? () Against proposal () Against proposal () General commercial () General ()	1 AIG 2B	DECORUM WILL BE ENFORCED.		2
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? () Against proposal () Against proposal () General commercial () General ()	,,,,,			
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? (()) Against proposal ()) Against proposal () Against proposal () General comments or Organization Affiliation: ACADEMIA AVANCE	I wish to speak before the	Courcil		
Name:	•	Name of City Agency, Department, Committee o	r Council	
Name: () General comm Business or Organization Affiliation: ACADEMIA AVAVCE 116 N ACS 57	Do you wish to provide general		sal on the agenda?	For proposal Against proposal
Business or Organization Affiliation: ACADIMIA AVAVCE Address: 115 N Avs 53 Street City State Zip Business phone: 323-230.7270 Representing: Avance	Name:	RICARDO MIRELES		() General comments
116 N Acc 57	Business or Organization Affiliati	on: ACADEMIA AVAVCO	· }	
Business phone: 327-230.7270 Representing: Awarco	116	N Acc 57		
	Business phone: 323 - 23	20.7270 Representing: Numco	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			ORMATION BELO	w:
Client Name: Phone #:	Client Name:		Ph	none #:
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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

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Date 1 28 13	THE CITY COUNCIL'S RULES OF	Council File N	No., Agenda Item, or Case No.
	DECORUM WILL BE ENFORCED.		-0923(-7)
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·	Name of City Agency, Department, Commi	ttee or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a	proposal on the agend	a? (For proposal
Name:C/N/)Y	MONAHAN- SCHWA	= 25TEIN/	() General comments
Business or Organization Affiliati	on: CARTWI	TEFL	
Address: <u>688 S.</u>	SANTA FE AVE, LA	CA	9002)
Business phone: 213.53	SANTA FIE AVE, LA City 7.068 Representing: CAR	JWHET L	Zip
	A PAID SPEAKER AND PROVIDE CLIENT		
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY (COUNCIL'S RULES O	Council File No	., Agenda Item, or Case No.
8.28.13		WILL BE ENFORCE	· .	11-0923
I wish to speak before the	city (Louncel		
•	Name of City Age	ncy, Department, Com	mittee or Council	
Do you wish to provide general p	oublic comment, or to	o speak for or against	a proposal on the agenda	?()For proposal ()Against proposal
Name: Mary C	Jarcia			() Against proposal () General comments
Business or Organization Affiliati	on:			
Address: 5/23 Call	uengo Bl.	NoHo	CA- State	91601 .
Business phone:	\sim		- State	2-1 0
CHECK HERE IF YOU ARE A	A PAID SPEAKER	AND PROVIDE CLIE	NT INFORMATION BELO	ow:
Client Name:			P	hone #:
Client Address:				
Street		City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
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10/00/01C		
I wish to speak before the	Mural (Kdina	nee
Na Na	ame of City Agency, Department, Committee or	Council
Do you wish to provide general public	c comment, or to speak for or against a propose	
7/10/10	1/a //	()Against proposal ()General comments
Name: Lesgena		() deneral comments
Business or Organization Affiliation: _	Signery Tondate	on Of the ask
Out of the second	I DA CON I Made	0 0 5 12
Address: SSO/ FOR	Tank St During	Ca, 90291
Street	City U	State Zip
Business phone: 62-54/	Representing: Our	2) fondallon
69	791	
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PROVIDE CLIENT INFOI	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
aug	DECORUM WILL BE ENFORCED.	11-09	723 #7
I wish to speak before the	City Conneil		
	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	osal on the agenda	W7 Provisions a? (X) For proposal () Against proposal () General comments
•			
Business or Organization Affiliati	ion: <u>BCC</u>		
Address: Mes Amews	rod Rd LA City	CA	90049 Zip
Business phone: 3(1 472 9	1775 Representing: BCC	State	∠ip
	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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28 AUG 2013	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	e or Council	
-	public comment, or to speak for or against a pro	posal on the agenda?	() For proposal
Name: WAYNE	HEALY		() Against proposal General comments
<i>I</i> Business or Organization Affiliati	ion: EAST LOS STREETS	SCADERS	
Address: ROB 31460		CA	90021
Olloct	Only	State	Zip /
, ,	1676 Representing: Self	A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.A.	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELO	W:
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Date XVX 29, 2013	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
/ (DECORUM WILL BE ENFORCED.		XX
wish to speak before the	My Connail		
Na	me of City Agency, Department, Committee or	Council	
Name: 15WWS 16WW	comment, or to speak for or against a proposa	on the agenda	? () For proposal () Against proposal () General comments
Business or Organization Affiliation:	A DAVINOZ WI NEIWOT	1/10/0	TO WINGS
Address: 350 N · N	MISSION RD. LOS ANGE	15 CA	90031
Business phore (26) 99 40	Representing: City / PDL	State 1	Zip *
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:			
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Date 8/2 8/2013		UNCIL'S RULES OF ILL BE ENFORCED.	ITEM	le No., Agenda item, or Case I 7 7 MWalq 1-0923	No.
I wish to speak before the	A City Coc Name of City Agency	MCCL , Department, Commit	tee or Council	-	
Do you wish to provide general pu Name: モMILY WIN	ublic comment, or to s	•		enda? 🎮 For proposal 🗗 () Against propos () General comm	sai
Business or Organization Affiliation	n: VENICE	ARTS COL	NCIL		
Address: 739 PALA	NS BLUD.	VENICE	CA	90291	
Street Business phone: (310) 306	·7372 Representi	city ng: VENICE	State ARTS CC	Zip OUNCIL	
CHECK HERE IF YOU ARE A					
Client Name:		·		Phone #:	A
Client Address:Street		City	State	Zip	

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Date X	THE CITY COUNCIL'S RULES OF	Council File No., A	genda Item, or Case Na /
14402.2012	DECORUM WILL BE ENFORCED.	11	672 WX
	1		100 f
I wish to speak before the	City Come		
	Name of City Agency, Department, Committee	or Council	
	oublic comment, or to speak for or against a proportion: Aztecs Risins	osal on the agenda? (For proposal Against proposal General comments
Address: Street	J. Eroadway LA	CA	9003/
Business phone: $(333)44[$	City OI 67 Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW	<i>t</i> :
Client Name:		Pho	one #:
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Date 8/28/2013	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File I	No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	r Council	* A 11 A
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenc	la. () For proposal () Against proposal
Name: FEINA D. C	ERVANIEZ		Ga General comments
Business or Organization Affiliati	on: ARTIST - PROF. CSUN		
Address: 2 4409/2 V	AN HORNE Los Angeles,	<u>CA</u> State	9031 Zip
Business phone: 3/6-677-6	259/ Representing:	pell	
	A PAID SPEAKER AND PROVIDE CLIENT INFO		Low:
Client Name:		***************************************	Phone #:
Client Address:Street	City	State	Zip

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Date 8/28/13		THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No. I Ord In and
I wish to speak before the		City Council of City Agency, Department, Committee	or Council	
•				
Do you wish to provide gener	al public cor	nment, or to speak for or against a propo	osal on the agen	da? () For proposal
Name: Felige Sa	nchy			() Against proposal () General comments
Business or Organization Affi	liation:	SPARC		***************************************
Address: <u>685 Ven</u>		Venier	Ce	90291
Street Business phone:		City Representing: SARC	State	Zip
		PEAKER AND PROVIDE CLIENT INF		ELOW:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip

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Date 8/28/13	"	Y COUNCIL'S RULES (IM WILL BE ENFORCE	<i>3</i> 1	No., Agenda Item, or Case No.
I wish to speak before the		City Co	· · · · · · · · · · · · · · · · · · ·	
	reamo or only re	gorioy, Doparmont, Con	minimo or odditon	
Do you wish to provide general Name:	public comment, o	r to speak for or agains	t a proposal on the agenc	la? () For proposal () Against proposal () General comments
Business or Organization Affiliat	tion: 5P4	SRC.		
Address: 685 Vo		Venice	State	90291
			State	ΖIP
Business phone:	Repre	senting:		
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Date 8/28/13		COUNCIL'S RULES OF I WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the		CHY Council ency, Department, Committee of	r Council	
Do you wish to provide genera	I public comment, or	to speak for or against a propos	sal on the agenda?	() For proposal () Against proposal () General comments
Business or Organization Affilia		RC		· · · · · · · · · · · · · · · · · · ·
Address: 655 Street	Venice	Jenice city	State	arza1
Business phone:	Repres	enting:		
·	,	AND PROVIDE CLIENT INFO		w:
Client Name:		***************************************	Ph	one #:
Client Address:		City	State	Zip

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Date 8-27-7513	THE CITY COUNCIL DECORUM WILL B		Council File No., Agend	
17 000)			11 0 10	/
I wish to speak before the	Couril			
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Do you wish to provide general p		or or against a proposal	\ /	For proposal B Against proposal General comments
Business or Organization Affiliati	on: MVCC			
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Business phone:	Representing:			
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Date 1	THE CITY COUNCIL'S RULES OF	Council Fife No., Agenda Item, or Case No.
12/26/15	DECORUM WILL BE ENFORCED.	Ideas #7
I wish to speak before the	Coto Can	
	e of City Agency, Department, Committee or	Council
	V	\mathcal{A}
Do you wish to provide general public of	comment, or to speak for or against a proposa	
Name: PORVI	VARODS	() General comments
Business or Organization Affiliation:		
Address: ZI W	. The Strace	19 to 14
Street	City	State J Zip
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Park (2013)	THE CITY COUNCIL'S RU DECORUM WILL BE ENFO		Council File No	Agenda Item, or Case No.
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	pe of City Agency, Departmen	t;7Committee or C	Council	
Do you wish to provide general public	eomment, or/to speak to or/a	painst a proposal	on the agenda	? () For proposal
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1		S	3	
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Date 08 28 20 3	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 Coy Centra	- V I
	Name of City Agency, Department, Committee or	Council
Do you wish to previde general publishme: Name: Business or Organization Affiliation:	Edu Park No	al on the agenda? (i) For proposal A () Against proposal () General comments 24 box wall
Address: 110 \	monton Ad- , C.A	- 40°Ho
Business phone: 213-2	50-34 City Representing:	State Zip
CHECK HERE IF YOU ARE A P	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 9 20 3	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. City Council		
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Do you wish to provide general puntame: Samanth	ublic comment, or to speak for or against a propo	osal on the agenda? For proposal () Against propos () General comm	
Business or Organization Affiliation	Aztecs Rising	·	
Address: 3516 N.	Broadway LA.	. Ca. 90031	
Business phone 323 441-	0187 Representing: MWA (ordinan Cl	
~	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	·····

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8-28-2013	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	1.1/50
Do you wish to provide general Name: DENSY	public comment, or to speak for or against a prop	oosal on the agenda	Proposal () Against proposal () General comments
Business or Organization Affiliati	ion: NEIGH COONCIL LIS	KSTCH.	PLAYA
Address: 7929 &	REEN AVE CA	J OS	
Business phone 320 641-	-4199 Representing: NOW	P	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELC	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
8.28.13	DECORUM WILL BE ENFORCED.	
I wish to speak before the	Council	J
	Name of City Agency, Department, Committee	ee or Council
Do you wish to provide general p	oublic comment, or to speak for or against a pro	(Against proposat
Name: KICARdo COCR	(K CKC)	General comments
Business or Organization Affiliati	on: Pier Union Housing Corp.	(The GRANG LAB)
Address: 1038 Vanice	bl dos Angelas	Calif 90013
Street Business phone: 213-747-27		State 7 Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	Clota 7in
⊃ાહ€દ	City	State Zip

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Date 8/28//3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	No., Agenda Item, or Case No.
I wish to speak before the	City Coun sic		
	Name of City Agency, Department, Committee or	Council	
-	public comment, or to speak for or against a propos	-	la? () For proposal () Against proposal General comments
Name:	0 (105		— General Comments
Business or Organization Affiliati	on: pico union H	00011	202
Address:	on: Pico Union H Venice Blvd LA	State	90015 Zip
Business phone: 23747	-7790 Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	.ow:
Client Name:		***************************************	Phone #:
Client Address:	City	State	Zip

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			0 0/122 0/ 0	
Date Aug 28-2013	THE CITY COUNCIL'S DECORUM WILL BE E		Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Countre!			J
	Name of City Agency, Departr	nent, Committee or Coun	cil	
Do you wish to provide general post Name: Samuel Down Business or Organization Affiliati	law es			() For proposal() Against proposal(★) General comments
				done
Address: 1038 Ver	110-6 Blvd 60	<u> </u>	(q	700/5
Business phone: 213-79	+7-2790 Representing:		State	Z:lþ
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROV	IDE CLIENT INFORMAT	TION BELO	N:
Client Name:			Ph	one #:
Client Address:				
Street	City		State	Zip

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Date Stack 3	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
1 21010	DECORUM WILL BE ENFORCED,	1 11-0923
I wish to speak before the	City-Council	
,	Name of City Agency, Department, Committee or	r Council
	public comment, or to speak for or against a propos	Version to
Name: Unvistica S	om to	() General comments
Business or Organization Affilia	tion: Pacific Palisades Con	
Address:	Pacific Palisad	les, CA 90272
Street		State Zip
Business phone: 310-721-	Representing: PPCC	
	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 8 · 28 · 20/3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	ity Council	
Nam	e of Sity Agency, Department, Committee or	Council
Name: Francisa	comment, or to speak for or against a proposa	() General comments
Business or Organization Affiliation:	MUtalist / Att	-block
Address: 567 3/4	Brooks Ave Ve	11ce, CA 90291
Business phone 3 10 40 3 7	Chito:	State Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
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Date 8/24/13		NCIL'S RULES OF LL BE ENFORCED.	Council File I	No., Agenda Item, or Case Mg
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Business or Organization Affiliati	ion: Pres. Ver	uce Heighbo	Thoud Co	uncil
Address: P. J. Box	504	Vene		90294
Business phone: 3/05/5-	-4220 Representing	q:	State	Zip /
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Date \$28 "2013	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
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Business or Organization Affiliation	on: _ / - / / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 /	
Address: <u>1906</u>	NOROWAN AN L	A. CA 90032
Street	City 17-8903 Representing: <u>CITY WID</u>	State Zip BUDACS
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
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Dat AU 6-22-20	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
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·	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
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Date	THE CITY COUNCIL'S RULES OF	Council File No., A	Agenda Item, or Case No.
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	A PAID SPEAKER AND PROVIDE CLIEN	${ u}$ information below	v: [
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Date 8/28/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
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	on: Muralist sett	employed
Address: 4/0 5 /	Buslang AVE #11	A: Callf. 90039
Business phone 323 299-	Bubling AVE #12 2808 Representing: Myself	State Zip
	u PAID SPEAKER AND PROVIDE CLIENT I	i i
Client Name:		Phone #:
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Business or Organization Affiliation	on: Pius Umion Ho	18h	
Address: 1578 VC	mire Los Angeles	90015	
	€2€2 Representing:	Union Housing	
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Date	THE CITY COUNCIL'S RULES O	F Council File N	., Agenda Item, or Case No.
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Name: MARTIN	1 CHARLOT		() General comments
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Address: 127 NOT	TH TAPLE ST. BIZ	BARK CA	91509
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	A PAID SPEAKER AND PROVIDE CLIE	•	ow:
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Address 7323 W.	12 th SK	Los Angeles	Ca.	90006
Street Business phone: 626-71	Z-6776 Repr	resenting:	ordinance.	Residential & Comer
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Client Name:				Phone #:
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Date 8/28//3 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committed	City Council ee or Council	
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Business or Organization Affiliation Address: 1038 U-lyni	: Pico Union Hou ce los Angeles	sing CA	70015
Business phone: 213:747-25	PAID SPEAKER AND PROVIDE CLIENT	ion Housing	zip
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Date	THE CITY COUN	CIL'S RULES OF	Council File No., A	genda Item, or Case No.
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·	Name of City Agency, De	epartment, Committee o	or Council	* (* /
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Name: <u>Suraure</u>	Thompson.	Co-brende	() General comments
Business or Organization Affiliati	on: Newce	Agets Cone.	najl	.,,
Address: <u>245</u>	Kenne		Journ	90291
Street Business phone: <u>3/0 -590-3</u>	549 Representing:	Jeure Juss	june f	Zip *
CHECK HERE IF YOU ARE A		•	ORMATION BELOW	
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Date B/2B/13 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	1797	., Agenda Item, or Case No.
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Business or Organization Affiliation:	SANCH TO INVOLVE PL	IMO ATE	EMCANE (SIPA)
Address: <u>3200 W 7.</u>	AME OT LA	CA	9026
Business phone: (2/3)36	7- Representing: SIPA	State	Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELC	ow:
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Date 8 28 1	f-2	COUNCIL'S RULES OF I WILL BE ENFORCED.	Council File N	o., Agenda Item, or Ca	ase No.
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I wish to speak before the	osn)	C/L		0097160	<u> </u>
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Business or Organization	Affiliation:	nd . Ear	1A BONI		
Address:	W. 000 3311	113	4 700		, <u>.</u>
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	ARE A PAID SPEAKER				
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Date 8/28/20/3 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Cholina Medical Committee or Conference of City Agency, Department, Committee or	re T	Agenda Item, or Case No.
Do you wish to provide general public co	omment, or to speak for or against a proposal	on the agenda?	(L) For proposal
Name:	Sigueiros Fondo Cullen St.	tion of	General comments He ACS Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOR	MATION BELO	w:
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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 8/28/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. Mural Ordinama
I wish to speak before theNan	ne of City Agency, Department, Committee	or Council
Name: Callor Rogal	comment, or to speak for or against a prop	osal on the agenda? () For proposal
Business or Organization Affiliation:	SPARC	
Address: 685 Vanice Street	Vonea C	1009) State Zip
Business phone:	Representing: SPARC	
	SPEAKER AND PROVIDE CLIENT INI	FORMATION BELOW:
Client Name:		Phone #:
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Date 8 28 13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No. Murals		
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Date 8/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	., Agenda Item, or Case No.
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Name: Willie II	oublic comment, or to speak for or against a propos		? () For proposal () Against proposal () General comments
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Date 8/28/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case N Murals Ordanance F	فعيير بمحوسيوسا
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Address: 4962 La Street	Calandria Dr. L.A.	<u>OA</u> 90072	·····
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Date 28 / 3 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.	
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Date /2/12	THE CITY COUNCIL'S RULES OF	Council File N	a., Agenda Item, or Case No.	
8/8/49	DECORUM WILL BE ENFORCED.	(
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Date 8/24/13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No. J. Manadores
(I wish to speak before the			`
·	Name of City Agency, Department, Committe	e or Council	
Name: Rober to De Business or Organization Affiliat	public comment, or to speak for or against a pro of Hoyo tion: Mobile Musel Lab		(For proposal () Against proposal () General comments
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Pate 8-28-13	THE CITY COUNCIL DECORUM WILL BE			Agenda Item, or Clise No.
wish to speak before the	uty Coursel			
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Date 8 28 / 13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Iten	n, or Case No.
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Date \$ 28 3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.		
I wish to speak before the	COUNCIL			
	Name of City Agency, Department, Committee or Council			
Do you wish to provide general Name:	public comment, or to speak for or against a pro	roposal on the agenda? () For proposal () Against proposal () General comments		
Business or Organization Affiliation: LA FREEWALLS PROTECT Address: C52 MWTFO ST. #302 LA CA. 7002/ Street City State Zip				
Address: 652 M	MIEO ST. 4702 LA	<a. 90021<="" td=""></a.>		
	City Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phone #:		
Client Address:Street	City	State Zip		