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Date 5.1-17

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

Council File No., Agenda Item, or Case No. 11 - 1246 - 51

I wish to speak before the A RTS Name of City	ARKS Agency, Department, Committee	e or Council	
Do you wish to provide general public comment Name: JODY RATH Business or Organization Affiliation: ZIVER	``		? () For proposal () Against proposal () General comments
Address: 3919 2 ZIGALI AVE. Street Business phone: 310-463-4846 Re	LOS ANGELES		90036 Zip
CHECK HERE IF YOU ARE A PAID SPEAK	KER AND PROVIDE CLIENT IN		
Client Address:		F	Phone #:
Street	City	State	Zip

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

Council File No. Agenda Item or Case No.

CITY OF LOS ANGELES SPEAKER CARD

Date

05/01/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	11-1246-	·SI
I wish to speak before the	Arts Parks Committee Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general p	public comment, or to speak for or against a prop	oosal on the agenda	
Name: Jennifer Sam	SM		() Against proposal () General comments
Business or Organization Affiliati	ion: River LA		
Address: 525 S. He	with Los Angeles	CA	90013
Street Business phone: (323)271-7	with Los Angeles City Representing: River LA	State	Zip
	A PAID SPEAKER AND PROVIDE CLIENT IN		ow:
Client Name:			Phone #:
Client Address:			



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

1 MAY 17	THE CITY COUNCIL'S REDECORUM WILL BE ENF		Council File N	o., Agenda Item, or Case No.
wish to speak before the	Name of City Agency, Departme			
Name: Steve Chu	public comment, or to speak for or	against a proposal	on the agenda	A? (For proposal () Against proposal () General comments
Business or Organization Affilia	tion:			
Address: 966	SNOTO MODICA BLYD.	BW. HUS	CD.	
Street	SNOTA MONICA BLVD. City 493 Representing:	amujed &	State	Zip
Business phone: 310-904. E	nepresenting.	V 0		
	A PAID SPEAKER AND PROVIDE	0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -	MATION BEL	ow:
CHECK HERE IF YOU ARE		E CLIENT INFORM		OW:

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Date 5-1-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	ittee or Council	
	public comment, or to speak for or against a	proposal on the agenda?	
Name: John Swith			Against proposal General comments
Business or Organization Affilia	ation: Liver / A		
Address: 525 S. A	Hewitt LA City	State	900B
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW	·:
Client Name:		Pho	one #:
Client Address:Street	City	State	Zip

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Date 5/1/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Av+5, Pak 5 a River 10 Name of City Agency, Department, Committee	
	ublic comment, or to speak for or against a pro	oposal on the agenda? () For proposal () Against proposal () General comments
Name:Carrie Business or Organization Affiliation Address:Street	gate woud St.	CA (A 9003 / State Zip
	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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

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

I wish to speak before the	ARTS Pronus+	River		
	Name of City Agency, De			
Do you wish to provide genera	I public comment, or to speak	for or against	a proposal on the agenda?	() For proposal (≯) Against proposal
Name: KAREN BA	MART		<u> </u>	(A) General comments
Business or Organization Affilia	ation: resuper			
Address:Street		City	State	Zip
Business phone:	Representing: _			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND P	ROVIDE CLIEN	NT INFORMATION BELOV	V:
Client Name:			Ph	one #:
Client Address:Street		City	State	7in

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5/1/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No.
I wish to speak before theN	ame of City Agency, Department, Committe	e or Council	
Name: PEN FELOMA	ic comment, or to speak for or against a pro NIA LEUDER + ASSOCIA	<u>*</u>	For proposal Against proposal General comments
			0.073
Address: 185 S. MRE	es other us angele	State	90033 Zip
Business phone: 213 384 384	Representing:		
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW	/:
Client Name:	····	Pho	one #:
Client Address:			
Street	City	State	Zip

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Date 5 - 1 - 1 - 7	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Avt 3 Pal 2 Cion Name of City Agency, Department, Committee	or Council
Name: ELAINE	public comment, or to speak for or against a prop	osal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliati Address:	on: OAN RITHEL	
Business phone: 8/8-95(904 Representing: Bulge 7	State Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date / MAY 17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
	Name of City Agency, Department, Committee or	Council
Do you wish to provide general pu	blic comment, or to speak for or against a propos	al on the agenda? () For proposal
Name: ARTHU	R GOLDING	() Against proposal () General comments
Business or Organization Affiliation	n: AGA	
Address: 2548 N	CATALINA ST LA	(1) 90027 State Zip
Business phone: 213 622	SOS Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 05/01/dol7	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theNa	Pana Committee me of City Agency, Department, Committee	or Council
Do you wish to provide general public Name: Ar MOSHOV	comment, or to speak for or against a propo	osal on the agenda? () For proposal () Against proposal General comments
Business or Organization Affiliation:	Atwater Stables / re	esident los feliz village
Address: 3434 Street Study	in Are #357 LA	(A 90039 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State 7in

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05 (10) (7	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		, Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee o	r Council	
Do you wish to provide general	public comment, or to speak for or against a propos		For proposal Against proposal General comments
Business or Organization Affiliati	ion: From LA	O 1	20.5
Address: 535 S. Business phone: 332 34	City City	State	Zip
	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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05 01 17	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 of	r Council
Do you wish to provide general pu	ublic comment, or to speak for or against a propos	
Name: Olivia Fr		() Against proposal () General comments
Business or Organization Affiliatio	n: Atwater Stables	
Address: 4000 Vov	dant street CA	CA S 50039 State Zip
Business phone:	Representing:	
	PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:Street	City	State 7in
Street	City	State Zip

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Date 5/1/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	ARTS PARKS RIVE Name of City Agency, Department, Committee		
Do you wish to provide genera	l public comment, or to speak for or against a prope	osal on the agenda?	
Name: KARIN	FLORES		Against proposalGeneral comments
Business or Organization Affilia	ation:		
Address:			
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELO	w:
Client Name:		PI	hone #:
Client Address:	City	State	Zip

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