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Date 10/8/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	nics Commission & Rules, Ele	ction Committee	e
	Name of City Agency, Department, Committee		
Do you wish to provide general pu	ublic comment, or to speak for or against a pro	oposal on the agenda?	<ul><li>( ) For proposal</li><li>( ) Against proposal</li><li>( ) General comments</li></ul>
Business or Organization Affiliatio	1: SOUTH ROBERTSON NC		
Address: 91% W. 24 <sup>th</sup> Street	ST LA.	CA State	90034 Zip
Business phone: Z13-804-66			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELO	w:
Client Name:		Ph	none #:
Client Address:		0	
Street	City	State	Zip

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I wish to speak before the Name	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  e of City Agency, Department, Committee of	Council File No., Agenda Item, or Case No.
	comment, or to speak for or against a propo	
Name: Darry Lev	ine	( ) General comments
Business or Organization Affiliation:	SORONC	
Address:		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 10/9/10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., 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 pu Name: A We Cord	blic comment, or to speak for or against a propo LZ n: Elac		( ) Against proposal     ( ) General comments -
Address:Street	City	State	Zip
	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT INF		OW: Phone #:
Client Address:Street	City	State	Zip

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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			
	Name of City Agency, Department, Committee	or Council	
	al public comment, or to speak for or against a prop		? ( ) For proposal ( ) Against proposal General comments
Business or Organization Affil	liation:		
Address:Street	LA	CA	90023
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	E A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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Date / 0/8//(/	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
Name: Evalest	ablic comment, or to speak for or against a propo	( ) Against proposal ( ) General comments
Business or Organization Affiliation	n: Forsotten Amen	icauls Network
Address:Street	City	State Zin
Business phone: 310 730 9	328 Representing: West Adam	us Neighborhood Coleaced
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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I wish to speak before the Nar	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  The of City Agency, Department, Commit		Agenda Item, or Case No.  + Rwagletin + I
Do you wish to provide general public	comment, or to speak for or against a p	proposal on the agenda?	( ) For proposal
Name Dasal W	Victoral Neirma		( ) Against proposal ( ) General comments
Name:	(10((24)		= 0 1 /
Business or Organization Affiliation:	East Area Progr	elling Denorth	5 Denutation
Address:Street	City	State	Zip
Business phone:	Representing:		
VIIII III	-		
CHECK HERE IF YOU ARE A PAII	D SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	W:
Client Name:		Pr	none #:
Client Address:			
Street	City	State	Zip

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Date		CORUM WILL BE EN		Council File N	lo., Agenda Item, or Case No.
I wish to speak before the _		Its 15	ent, Committee or Co	uncil	
Do you wish to provide gen	eral public comme		against a proposal o		a? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization A	ffiliation:		/	Person	
Address:/ Street	729 A.	Bedfad	Los Angeles	State	90035 Zip
Business phone:	F	Representing:			
CHECK HERE IF YOU A	RE A PAID SPE	AKER AND PROVID	DE CLIENT INFORM	IATION BEL	.ow:
Client Name:					Phone #:
Client Address:		0:			_
Street		City		State	Zip

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Date 10 8 2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the		
r	lame of City Agency, Department, Committee	e or Council
	lic comment, or to speak for or against a pro	/ \ American proposal
Name: Chamba	Sandrez	( ) General comment
Business or Organization Affiliation:	Commonty college	\$
Address:Street		
		State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
Street	City	State ZIP

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Date 10 8 14	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	
Do you wish to provide genera	al public comment, or to speak for or against a prop	posal on the agenda? (V) For proposal
Name: Raul C	lans	( ) Against proposal ( ) General comments
Business or Organization Affilia	ation: Latino Coalition of Harvest fordation, of Salv	L.A. PAC, Cammunity vador corridor & Permanare Chur
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
	5)	

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Date 10-8-14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCE	D. (	, or Case No.
I wish to speak before the	Name of City Agency, Department, Com	mittee or Council rel	elfer
	public comment, or to speak for or against	a proposal on the agenda? ( ) For pr	oposal
Name: E15A	BARBOZA		st proposal ral comments
Business or Organization Affiliati	on:		
Address:			
Street	City	State Zip	1
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIE	NT INFORMATION BELOW:	
Client Name:		Phone #:	
Client Address:Street	City	State Zip	

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Date 10/8/14	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 C	Commissi	Dh
Do you wish to provide general p	public comment, or to speak for or against a proposa	I on the agenda	? (X) For proposal
Name: Doug	ARSENEAULT	li li	Against proposal     General comments
Business or Organization Affiliati	on: Valley Industry & Comm	lerce Assoc.	
Address: 5121 VA		CA	91403
Business phone: (SIS) 8	7-0545 Representing:	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip
Sucet	Olly	State	Σίμ

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Date 10/8/14	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	
	neral public comment, or to speak for or against a pro		
Name: On	Liherman		General comments
Business or Organization A	Liberman Affiliation: Sow Mic	· · · · · · · · · · · · · · · · · · ·	
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU A	ARE A PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELO	w:
Client Name:		PI	none #:
Client Address:	City	State	Zip

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Date 10 /8 /14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
	me of City Agency, Department, Committee or	Relations	Committee
Do you wish to provide general public  Name:	comment, or to speak for or against a proposa	al on the agenda	? ( For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:	Kocean American Coa	lition	20.00
Address: 312   Street	City	State	70020 Zip
Business phone: 2/3.365.599	D SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow.
Client Name:	5 SPEAREN AND PROVIDE CEIENT INFO		hone #:
Client Address:Street	City	State	Zip

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Date (0/8/14		UNCIL'S RULES OF ILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the	me of City Agency	, Department, Comm	ented Affaire ittee or Council	Comm, (Joint rech
Do you wish to provide general public	comment, or to s	peak for or against a	proposal on the ager	nda? ( ) For proposal
Name: Andrew Doy	las			( ) Against proposal ( ) General comments
Business or Organization Affiliation:	N/A			
Address: 308 E 9H	57 406	LA	CA	90015
Street	Donroconti	City	State	Zip
Business phone:	hepresenti	ng		
CHECK HERE IF YOU ARE A PAI	D SPEAKER AN	D PROVIDE CLIENT	INFORMATION B	ELOW:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip