Date 10/15/19			TY COUNCIL'S		Council File	e No., Agenda	Item, or Case No.
I wish to speak before the _				# RUQD, tment, Committee of		w, 10	Kegovener
Do you wish to provide gene	eral public	comment,	or to speak for	or against a propos	al on the ager		
Name: SAZA Y	hirch	-IELL				() A	Against proposal General comments
Business or Organization Af	filiation:	VI	CA				
Address: 5171 Street	VM (NYS	13610	SHORMAN	OAKS	CA	91403
Street			City	/	State	Z	p
Business phone:		Rep	resenting:				
CHECK HERE IF YOU AF	RE A PAIC	SPEAKE	ER AND PRO	/IDE CLIENT INFO	RMATION BI		:
Client Address: Street			City	1	State	Z	ip

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	CITY OF LOS ANGELES SPEAK	EN CAND
Date 10-15-14	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	9 ion + Rulos + Elections commit
	neral public comment, or to speak for or against a pro	
Name: Doson	Ackerman	() Against proposal (i) General comments
Business or Organization A	ACKERMAN	
Address:Street	Oib.	State Zip
Business phone:	Representing: Myself	State Zip
	RE A PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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NOTE: THIS IS A PUBLIC DOCUMENT.

City

Street

Date O / 15 / 2614 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the EHICS J Elections Name of City Agency, Department, Committee of	Confice or Council
Do you wish to provide general public comment, or to speak for or against a propo	sal on the agenda? () For proposal
Name: Kirston Calc	() Against proposal General comments
8 6 1 10	Olitical Consultand.
Address: 1739 Fedova St Los Angel	State Zip
Business phone: Representing: My Self_	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:	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 Nam	ne of Oity Agency, Department, Committee	or Council
Do you wish to provide general public o	comment, or to speak for or against a propo	osal on the agenda? () For proposal
Name: LONARD &	BENTAMIN	() Against proposal () General comment
Business or Organization Affiliation:	annus Neighbork	Courcil
	whys Blid Van No	ys CA 9140> State Zip
Business phone: 86787472	A Representing: WWC	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	RULES & ELECTIONS COMM PUBLIC MEETING
I wish to speak before the RULES ELECTIONS & TIMES Name of City Agency, Department, Committee or C	COUNCIL COMMITTEE
Do you wish to provide general public comment, or to speak for or against a proposal	on the agenda? For proposal
Name: GREGORY WRIGHT	() Against proposal () General comments
Business or Organization Affiliation: SHERMAN ORKS N.C.	MINTORITY REPORT
Address: JA161 RNERSTOF DR. #3 5.0. (A	State Zip
Business phone: 18 40325 Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
Client Name:	Phone #:
Client Address: City	State Zip

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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. RULES & ELECTIONS CON	MITTEE
I wish to speak before the Rule & Clattons Committee or Council	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? For proposal	
Name: Christina Coolide () Against pro General co	•
Business or Organization Affiliation: CITIZEN DAAR	-
Address: 4570 VAN Nuy Blod + 494 Shumul AKS CA 934 Street Street	05
Business phone: (818)277-6979 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	THE CITY COUNCIL'S RULES OF THE CITY COUNCIL'S RULES OF THE COUNCIL'S RULES OF THE COUNCIL'S RULES OF THE CITY COUNCIL COU	OF	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Co	1	
Do you wish to provide ger	neral public comment, or to speak for or against	t a propesal on the agenda?	() For proposal
Name:	(= 1 //	Maren	Against proposal General comments
Business or Organization	Affiliation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU A	ARE A PAID SPEAKER AND PROVIDE CLI	ENT INFORMATION BELO	w:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date 10/15/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		., Agenda Item, or Case No.
I wish to speak before the	e of City Agency, Department, Com	mittee or Council	APATHY
Do you wish to provide general public c			/ \ A * / /
Name: SERVETTE.		EASURER	() Against proposal () General comments
Business or Organization Affiliation:	VANC		
Address: 15550 SATI	coy ST. VAN,	Vvys State	91406
Business phone:		T-17	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIEN	IT INFORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date 10/15/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before theI	les + Electures / Trytungo x Name of City Agency, Department, Committee	Relating or Council	5
Do you wish to provide general pub	olic comment, or to speak for or against a propo	sal on the agenda	
Name: Jay Be	26542		() Against proposal () General comments
Business or Organization Affiliation			
Address:			
Address: Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip
Street	Oity	Otato	~ 'P

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10-15-2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Na	LA City Council ame of City Agency, Department, Committee	ee or Council
	c comment, or to speak for or against a pro	
Name: Hans	Johnson East Area frog	() Against proposal () General comments
Business or Organization Affiliation:	Cast History	essive Democrats
Address:Street	City	State Zip
	Representing:	5,000
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date	THE CITY COUNCIL'S RULI DECORUM WILL BE ENFO	ES OF	e 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	public comment, or to speak for or ag	ainst a proposal on the ager	nda? () For proposal
Name: 303	O EPPERM	OLLER	() Against proposal () General comments
Business or Organization Affiliat	tion: MID 10WN	NOHO	NC
Address:Street	NOKO City	State	Zip
Business phone:	Representing:	(American Control of C	
	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date (0-(5-14	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 Council	
Do you wish to provide general pu	blic comment, or to speak for or against a propo	sal on the agenda? () For pro	posal t proposal
Name:	ic Preven	() Agains () Genera	al comments
Business or Organization Affiliation	n:		
Address:Street			
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 10/15/2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	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 prope	osal on the agenda?	() For proposal() Against proposal
Name: DENYSE .	SELESNICK		() General comments
Business or Organization Affiliati	ion: TALLANA STRUCTHOLDES		CITYWATCH
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW	V:
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip

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Date ///5///	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before theN	ame of City Agency, Department, Committee of	or Council	
Do you wish to provide general publ	ic comment, or to speak for or against a propo	sal on the agenda?	() For proposal
Name:	y HANDAL-		Against proposal General comments
Business or Organization Affiliation:			
Address:Street	City	State	Zip
	Representing:		
	AID SPEAKER AND PROVIDE CLIENT INFO		
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip

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Date 1/15/14	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO		Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Effects Jame of City Agency, Department	, Committee or Co	puncil	
Do you wish to provide general pub Name: 565EPH	SEGAL			() For proposal () Against proposal () General comments
Business or Organization Affiliation: Address: 9684 AMG0 4 Street	\$129 NorthRidge			Zip
COMMENT TO I MU Client Name: Be Read I TV	AID SPEAKER AND PROVIDE LAW OF MY NEIGHTZOIS LE ELLECTION DAY 15, P	DONT EVEN WEASE RUH	KNOW WHE	none #:
Client Address:	CLA CELEBS, City +	TO VOTE OH	Nov 4 Por	Zip

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Date 10/15/14	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	ee or Council	7369
Do you wish to provide general pub	olic comment, or to speak for or against a pro	oposal on the agenda?	() For proposal
Name: Miriam Fo	gler	AMOUNTO .	() Against proposal () General comments
Business or Organization Affiliation	V :	314-1-1-1	
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOV	w:
Client Name:		Ph	none #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	
I wish to speak before the	Name of City Agency, Department, Com	mittee or Council
Do you wish to provide general p		a proposal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliati	on:	
Address: 9634 Am	igo Ave #129 Northydge city	State 9/324 Zip
Business phone: 8/8-998-5	888 Representing: MySe/	+
CHECK HERE IF YOU ARE	PAID SPEAKER AND PROVIDE CLIEN	NT INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 10-15-14

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	KNIFZ FIFE (1907 - IN)	ERGOVERNMENTAL
	Name of City Agency, Department	, Committee or Council	RELATIONS
Do you wish to provide general Name: GARRY	public comment, or to speak for or ag	ainst a proposal on the agenda?	() For proposal () Against proposal () General comments
Business or Organization Affilia	ition: NHWNC		
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BELO	w:
Client Name:		Pt	none #:
Client Address:	04	Otata	7
Street	City	State	Zip

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10/17/11/	HE CITY COUNCIL'S RULES OF ECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
	f City Agency, Department, Committee	or Coupell
Do you wish to provide general public comm	ment, or to speak for or against a propo	
Name: Mike Sch	alfor,	() Against proposal (L) General comments
Business or Organization Affiliation:	follywood Kine	Ms Resident Det
Address: 724 Hall	:186 #10 LA	(A 9004 6 Zip
Business phone: 2/3 479 (2006	Representing:	
CHECK HERE IF YOU ARE A PAID SP	PEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:	0.4	Olate
Street	City	State Zip

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Connoil File No. Agenda Item or Case No.

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10-15-2011		NCIL'S RULES OF L BE ENFORCED.	(VV)10	- COMMUNT
I wish to speak before the		Department, Committee o		
	eneral public comment, or to spe	eak for or against a propos	sal on the agenda?	() For proposal
Name:	Maleamor			Against proposal General comments
Business or Organization	Affiliation:			
Address:	t	City	State	Zip
	Representing			
	ARE A PAID SPEAKER AND			
Client Name:			Pho	one #:
Client Address:Stree	t	City	State	Zip
01100	b.	,		r

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