13-1493

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Date 10/23/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Agenda Item, or Case No.
wish to speak before the			
Do you wish to provide general p	Name of City Agency, Department, Committee	oosal on the agenda?	( ) For proposal ( ) Against proposal
Name:	Jonathan Klein.	2,465	(X) General comments
Business or Organization Affiliation			
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:		P	none #:
Client Address:			
Street	City	State	Zip

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Date 16-27/15	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE	
I wish to speak before the	Name of City Agency, Department, Con	mmittee or Council
Do you wish to provide general possible.  Name: Clento Business or Organization Affiliation Address:	Bailey, Preside on: Northridge Eas	t a proposal on the agenda? ( ) For proposal Against proposal ( ) General comments  **The Symbology of Council ( ) Against proposal ( ) General comments  **The Symbology of Council ( ) Against proposal ( ) General comments
Business phone: Street	Y-5355 Prading: Glean Bo A PAID SPEAKER AND PROVIDE CLI	ent Information BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date		OUNCIL'S RULES O	_	lo., Agenda Item, or Case No.
10-27-15	DECORUM	WILL BE ENFORCED	PUB	UC CALLER
I wish to speak before the		cy, Department, Com	mittee or Council	
Do you wish to provide gener		speak for or against	a proposal on the agend	( ) Against proposal
Name: FERNANCE	00012		,	( ) General comments
Business or Organization Affil	iation: UNION Po	pulm 03 1	A LEOVOES NA	Myllen
Address: 3(8 S. N	TR GOANAW	City	State	90057 Zip
Business phone:	Represer	nting:	42 0 2 2 2 2	
CHECK HERE IF YOU ARI	E A PAID SPEAKER A	ND PROVIDE CLIER	NT INFORMATION BEL	.ow:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip

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Date 10/27/15	THE CITY COUNCIL'S RU DECORUM WILL BE ENF	JEES OF	file No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departmen	WENDAMENT COMPONENT	MITEE
	Name of City Agency, Departmen	it, Committee or Council	
G= 15	public comment, or to speak for or	against a proposal on the ag	enda? ( ) For proposal ( ) Against proposal General comments
Trainer	4/1//		General comments
	on: NESTWOAD (		
Address: 10940 Wills	THE BOLENTO ON SO	WE 1400 / LA State	CA 90024
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORMATION	BELOW:
Client Name:			Phone #:
Client Address:Street	O1L .	0	7:0
Street	City	State	Zip

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Date 10/27/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the $\overline{\mathcal{L}}$	Name of City Agency, Department, Committee		
Name: Roszbeh	public comment, or to speak for or against a propo Farahanipeur		<ul><li>Against proposal</li><li>General comments</li></ul>
Business or Organization Affiliati	on: West los Angeles	Chan	ber of Com
Address: 907 We	stwood #222 LA (	State	908 24 Zip
Business phone: 310_50	○ -8)   GRepresenting:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 0/21/15	THE CITY COUNCIL' DECORUM WILL BE		Council File No., Ag	enda Item, or Case No.
I wish to speak before the	FRENOMIC OF	THOMENT	CAMM 171	DE.
	Name of City Agency, Depa	rtment, Committee or Co	uncil	
Do you wish to provide general Name:	public comment, or to speak fo	r or against a proposal o	n the agenda? (	) For proposal ) Against proposal ) General comments
Business or Organization Affilia	tion: WESTWOOD	COMMUNITY	Canca	
Address: 10940 Wils	HIPE BLVO. #140	i CA, CA	State 900	710
Business phone:	Representing:	,	Otate	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PRO	VIDE CLIENT INFORM	ATION BELOW:	
Client Name:			Phor	ne #:
Client Address:				
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10/27/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Eco n	of City Agency, Department, Committee	ee or Council
Do you wish to provide general public con Name: Rozbeh Faraho	anipaur	<ul><li>( ) Against proposal</li><li>( ) General comments</li></ul>
Business or Organization Affiliation: $\underline{\mathcal{W}}_{\mathcal{C}}$	st Los Angeles	Chamber of Commer
Address: 907 Westwoods Street	31 val # 222 LA,	State Zip
Business phone: 310 - 500-811 6	Representing:	
CHECK HERE IF YOU ARE A PAID S	SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date		CIL'S RULES OF BE ENFORCED.	Council File No.	Agenda Item, or Case No.
l wish to speak before the _		elym of epartment, Committee of		n. Hee
Do you wish to provide gene	eral public comment, or to spea	ak for or against a propo	sal on the agenda?	
Name: JORGZ	PERS-2			<ul><li>( ) Against proposal</li><li>( ) General comments</li></ul>
Business or Organization Af	filiation: Public -	Innigo al	Policx	Intito
Address: 5/5 C	U/UMbic A	V. 2.4. C	A	OF LOSITM
Business phone: 323-	30-7f Representing:	PIPIL	State 9	0017
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND	PROVIDE CLIENT INFO	ORMATION BELO	w:
Client Name:			P	none #:
Client Address:				
Street		City	State	Zip

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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 10-27-15		Y COUNCIL'S RULES OF JM WILL BE ENFORCED.	Council File No	, Agenda Item, or Case No.
I wish to speak before the	Econom	ic Development		
	Name of City A	gency, Department, Committ	ee or Council	
Do you wish to provide genera Name: <u>Cobera Bas</u>	iod			? ( ) For proposal ( ) Against proposal (X) General comments
Business or Organization Affilia	ation: Commo	nity Health Coun	cils	
Address:	tel			
Address: Street		City	State	Zip
Business phone:	Repre	esenting:		
CHECK HERE IF YOU ARE	A PAID SPEAKE	R AND PROVIDE CLIENT	INFORMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:				

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Date [9 21 15		OUNCIL'S RULES OF VILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the	ne_ CGMMIL	lavelop were	ion-	
		y, Department, Committee	or Council	
Do you wish to provide  Name:	general public comment, or to s	speak for or against a propo	osal on the agenda	? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization	on Affiliation:	e College		
Address: 1600	Campus Kd	LA	CA	90041
Business phone:	23 254 1458 Represent	ing: VEP	State	Zip
CHECK HERE IF YOU	J ARE A PAID SPEAKER AN	ND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:				
Stre	eet	City	State	Zip

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Date	THE CITY COUNCIL	'S RULES OF	Council File	No., Agenda Item, or Case No.
(0/27/15	DECORUM WILL BE			l
I wish to speak before the	Name of City Agency, Depa		ouncil	
Do you wish to provide general Name: Poul Sino	public comment, or to speak for			da? (X) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affilia	tion: LA County	Dupt of P	ablie 1	Health
Address: 353- W-	Thin Blud 12	A tv	State	90010
Business phone: 713 -351	-フ チング Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PRO	VIDE CLIENT INFOR	MATION BE	LOW:
Client Name:				Phone #:
Client Address:	Ci	tv	State	Zip

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Date 10/27/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		o., Agenda Item, or Case No. 1493
I wish to speak before the	EDC  Name of City Agency, Department, Committee	e or Council	
Name: Jacquel	I public comment, or to speak for or against a provine Mayig  ation:  CHIRLA	posal on the agenda	( ) Against proposal
	L·A- City	CA	90057
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip

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Date 10 (21/2014	Council File No., Agenda Item, or Case No.	
I wish to speak before the	Name of City Agency, Department, Committee	ee or Council
Do you wish to provide general put Seneral		roposal on the agenda? ( For proposal ( ) Against proposal ( ) General comments
Address: 1000 Hu	1	CA State Zip
Business phone: 213, 346		INFORMATION 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., Agen			
I wish to speak before the	Economia Development Co.			
	Name of City Agency, Department, Committee of I public comment, or to speak for or against a propo		? ( ) For proposal ( ) Against proposal ( ) General comments	
Business or Organization Affilia	ation: Varion del Barrio Eleason Avenuer LA, Cr	4 900 State	73 <del>2</del> Zip	
Business phone:	Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:	
Client Name:		F	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 Ite	m, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	e or Council	Le
Do you wish to provide general p	public comment, or to speak for or against a pro	posal on the agenda? (4) For p	proposal
Name: Claud	$\sim$	( ) Agai	inst proposal eral comments
Business or Organization Affiliation	1 1 1 1 1	no	
Address: 2628 (	Sleason Dr LAD C	State Zip	
Business phone:	Representing:	Otato Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELOW:	
Client Name:		Phone #:	
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Date /0/24/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	, Agenda Item, or Case No.
I wish to speak before the	Econ Der Committee		
	Name of City Agency, Department, Committee	e or Council	
(Orang Fox	public comment, or to speak for or against a production:		? ( ) For proposal ( ) Against proposal ( ) General comments
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELO	ow:
Client Name:		P	hone #:
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Date 10/27/15		OUNCIL'S RULES VILL BE ENFORC		Council File No	., Agenda Item, or Case No.
I wish to speak before the					
	Name of City Agency	y, Department, Co	ommittee or C	Jouncii	
Do you wish to provide general p Name: ALEX SA	SAYAMA	speak for or again	st a proposa	on the agenda	? X For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliati	on: RESIDEI	V7			
Address: 217 € 8	TH STREET	LA		CA	90014
Street		City		State	Zip
Business phone:	Represent	ina:			
		9.			
CHECK HERE IF YOU ARE A	PAID SPEAKER AN	ND PROVIDE CL	IENT INFOR	MATION BELO	ow:
Client Name:				P	hone #:
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Date 10 /27/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	10 11/62/1	em, or Case No.
I wish to speak before the Etohy Nar	me of City Agency/Department, Comm		ul
Do you wish to provide general public Name:		( ) Aga	proposal ainst proposal neral comments
Business or Organization Affiliation:	Street vending	- 15	
Address: 1405-2hd, AU	18#9 LA	(A 900	329
Address: $\frac{1405-2hd}{\text{Street}}$ AUSINESS phone: $\frac{323}{289}$	Pepresenting: Street	renders zip	
CHECK HERE IF YOU ARE A PAIL			
Client Name:		Phone #:	
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Date 10/27/15	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 Co	er of the	GLy Corney
Do you wish to provide general p	public comment, or to speak for or against a proposal of	on the agenda?	For proposal
Name: 6 best	Sucet		Against proposal     General comments
Business or Organization Affiliati	on: National Lawyett Guil	12	
Address: 7/4 W D by	more B1. #450 Cut Angeles	State	Zip
Business phone: (213) 748	Representing: Street Vendors		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFORM	MATION BELO	W:
Client Name:		PI	none #:
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Street	City	State	Zip

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Date (0/21/15		TY COUNCIL'S RULES OF UM WILL BE ENFORCED.	Council File No., Agenda Item, or Case N		
I wish to speak before the	Econ De Name of City A	Agency, Department, Committee	or Council		
		or to speak for or against a prop	osal on the agenda?	For proposal	
Name: Business or Organization A	Pick Rodrigue	2 0 1 +		Against proposal     General comments	
Business or Organization A	Affiliation: Down to	um KesidenT			
Address: 4/1 W	Sth Steet	Las Aryeles	CA	90013	
Street  Business phone: 2/3-8	340-4758 Repr	City O	State	Zip	
CHECK HERE IF YOU A	ARE A PAID SPEAKE	R AND PROVIDE CLIENT IN	FORMATION BELO	ow:	
Client Name:			PI	hone #:	
Client Address:Street		City	State	Zip	

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Do you wish to provide general pub		ainst a proposal on	the agenda?	For proposal Against proposal
Name:	Anderhan - Bart	ren	0(	General comments
Business or Organization Affiliation:	national Lan	nen	build	
Address: 3435 VI	Ishire Bud	CA, CA	900	10
Business phone: 213 381-	Representing:	-/	State	Zip
CHECK HERE IF YOU ARE A P		CLIENT INFORMA	TION BELOW:	
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10 (27   15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Econ Dev.	
	Name of City Agency, Department, Committe	
Do you wish to provide gener	ral public comment, or to speak for or against a pro	oposal on the agenda?  For proposal  ( ) Against proposal
Name: Janu	Tenalian	( ) General comments
Business or Organization Affil	Tellalian  Hilliation: Bruging Marks	ts/Freshwirks
Address:		
Street Business phone:	City  Representing:	State Zip
CHECK HERE IF YOU ARI	E A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date Oct 27, 2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Keath Smith Econ	onic Des Committee
Do you wish to provide general	Name of City Agency, Department, Committee or public comment, or to speak for or against a proposa	al on the agenda? ( ) For proposal ( ) Against proposal
Name:	Kent JMITH	( ) General comments
Business or Organization Affilia	tion: LA Fashion District	BID
Address:	East Ninth St Suite	A1175
Street Business phone: 213-48	8-1 153 Representing: LA Fash	ion District BID
		RMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 10/27	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.			, Agenda Item, or Case No.
I wish to speak before the	B(ON Name of City Ager	ncy, Department, Committee	or Council	
Do you wish to provide general Name:	al public comment, or to	speak for or against a propo	osal on the agenda?	Against proposal General comments
Business or Organization Affili	ation: DLAN			
Address: Street			State	90013 Zip
Business phone:				
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT INF	ORMATION BELO	w:
Client Name:			P	hone #:
Client Address:Street		City	State	Zip

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10/27/15	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	
Do you wish to provide general p	ublic comment, or to speak for or against a propo	osal on the agenda? ( ) For proposal
Name: Aaron J	menez	( ) Against proposal General comments
Business or Organization Affiliation	n: Central City Associa	atton
Address: 676 Wilst	Fire Blad Las Angeles	CA 90017 State 7in
Business phone: (213) 416	-7512 Representing: Central (8)	ry Association
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 $(p-2)$	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File f	No., Agenda Item, or Case No.
I wish to speak before theN	ED Committee  Jame of City Agency, Department, Committee	or Council	
Do you wish to provide general pub	lic comment, or to speak for or against a prop	osal on the agenc	da? ( ) For proposal
Name: Marci	Rusing		( ) Against proposal     ( ) General comments
Business or Organization Affiliation:	CCA		
Address: U24	Ullime Blue #	State	Zip
Business phone: 213/4/4		Otato	Zip
	AID SPEAKER AND PROVIDE CLIENT IN	FORMATION BEI	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 10/27/245	THE CITY COUNCI	L'S RULES OF E ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Dep	artment, Committee or	Council	
Do you wish to provide general pu	blic comment, or to speak	for or against a proposa	al on the agenda?	) For proposal Against proposal General comments
Business or Organization Affiliation	1: 50MH	Orceter	Los Ans	seles
Address: 700 Street	swer L	us Anyeles	State	GOUL 7
Business phone: $2(3)$ $337$	PRepresenting:	Bon A/C	LA	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PR	OVIDE CLIENT INFO	RMATION BELOW	/:
Client Name:	항 -		Pho	one #:
Client Address:Street		Dity	State	Zip

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EXCEPT TO THE	EXTENT NECESSART FOR THE PRESIDING OF	FICEN TO CALL OF ON T	00
Date 10 27 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	nda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general pub	olic comment, or to speak for or against a prop	osal on the agenda?	) For proposal
Name: JerilyN Stay	pleton	(×	) Against proposal ) General comments
Business or Organization Affiliation:	: California National Os	ganeration for	2 Women
Address: 6810 Cohuenger	Park Trail LA	CA State	90068
Business phone: 323 543-1	730 Representing: California /	Yow	
CHECK HERE IF YOU ARE A P	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phone	e #:
Client Address:			
Street	City	State	Zip

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Date 10/27/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Eco	Name of City Agency, Department, Committee	
Do you wish to provide general po	ublic comment, or to speak for or against a prop	
Business or Organization Affiliation Address: 5131 Vo	on: Valley mousty + Com	verce 91403 State Zip
Business phone: 818-81		
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 10/27/15	THE C		lo., Agenda Item, or Case No.	
I wish to speak before the	Name of City	Agency, Department, Comm	ittee or Council	
Do you wish to provide general p		or to speak for or against a	proposal on the agend	a? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation	on: MADA	ME TUSSAMS	Houtwood	
Address 6933 Houtho	DO BLVD.	Mouthood	CA	90028
Street Business phone: 323 798 16		City	State	Zip
CHECK HERE IF YOU ARE A			Γ INFORMATION BEL	.ow:
Client Name:				Phone #:
Client Address:		City	State	Zip

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Date 10/27/15	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
A CA	public comment, or to speak for or against a pro	( ) Against proposal
Name:S  Business or Organization Affiliat	ion: Holly wood Chamber	Seneral comments  VDF Commercial
Address: 708 Holl	ywood Blud. CA, CA	9828 State Zip
Business phone:	Representing:Mumbus	Ship
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip



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Date 19-15	THE CITY COUNCIL'S RULI DECORUM WILL BE ENFOR	301	ile No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department,	Committee or Council	
	ublic comment, or to speak for or aga	ainst a proposal on the age	enda? ( ) For proposal
Name: CLABE	MARTLEY		( ) Against proposal General comments
Rucinoss or Organization Affiliation	1115 BIG		
Address: 34 CVAS	MINGTON BL	VENICE	90292
Street  Business phone: 316 9676	HING TON BL City Representing: BOARD	of DIEECTOR	Zip Zip
	PAID SPEAKER AND PROVIDE O		
Client Name:			Phone #:
Ollent Name.			1710110 #
Client Address:Street	City	State	Zip

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ZAOZI I IO II		
Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
10/27/15	DECORUM WILL BE ENFORCED.	
I wish to speak before the	conomic bevelopment C	
	Name of City Agency, Department, Committee	or Council
Do you wish to provide general p Name: Sarah Wal	public comment, or to speak for or against a propo	oosal on the agenda? ( ) For proposal ( ) Against proposal General comment
	^	[ ] a a l M
Business or Organization Affiliati	ion: Motion Picture Associa	ition of America
Address: 15301 V PM	tra Blud. Sherman Oaks	State 7/403
Business phone: 818935		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION 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.
Lucials to an acid before the	Economic Develop	me to Committee
I wish to speak before theNam	ne of City Agency, Department, Committee o	or Council
Do you wish to provide general public of Name:	comment, or to speak for or against a propo-	sal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:	tistoric Cor I	3ID
Address: 453 5 5	Pring St. Las Angeles	CA 96066
Business phone: 30383 63	Representing: Historic (	State BID Zip
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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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

2,0211101				
Date 10 / 27 / 15		OUNCIL'S RULES OF WILL BE ENFORCED.		genda Item, or Case No.
I wish to speak before the	Name of City Agen	HA - Economic J.	evelopment com	mittee
Do you wish to provide general possica Sall  Business or Organization Affiliati			(	) For proposal ) Against proposal ) General comments
Address: 1333 S. Street	Hope st.	Yos Angeles		90015 zip
Business phone: <u>213 66</u> CHECK HERE IF YOU ARE A	1			:
Client Name:			Phor	ne #:
Client Address:Street		Citv	State	Zip

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EXCEPTIO	THE EXTENT NECESSAR	T FOR THE PRESIDING OF	FICEN TO CALL OF	N 100
Date 10/27/15		UNCIL'S RULES OF ILL BE ENFORCED.	Council File No., 13-149	Agenda Item, or Case No.
I wish to speak before the	Ecommic de Name of City Agency	Velopment Committee	or Council	
Do you wish to provide gener Name:		peak for or against a prop	oosal on the agenda?	For proposal     Against proposal     General comments
Business or Organization Affil	iation: North Hol	Gwood BID/F	iguera Corid	or RID
Address: 3982 S.F				
Business phone: 213.740	. 9577 Representi	ng:		
CHECK HERE IF YOU ARI	E A PAID SPEAKER AN	D PROVIDE CLIENT IN	FORMATION BELOV	w:
Client Name:			Ph	one #:
Client Address:Street		City	State	Zip

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Date 0-27-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
	Name of City Agency, Department, Committee	
Do you wish to provide general pul Name: <u>Alisha</u> Ko	blic comment, or to speak for or against a propo	osal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
	: Hellen Company	
Address: Street Street		90013 CA State Zip
Business phone: 23-688	-1100 Representing: Hellen Com	DANY
CHECK HERE IF YOU ARE A I	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip



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Date 6 0 27, 2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
	Ecolomic Development Committee of Name of City Agency, Department, Committee of	
Name: Mark Rya	blic comment, or to speak for or against a propo	( ) Against proposal ( ) General comments
Business or Organization Affiliation	1: Venice State holders	Association
Address: 1615 M	dalusia Dreme Venice City   268 Representing: Venice Stake	e M 90291
Business phone: 3108716	268 Representing: Venice Stake	holdes Association
	PAID SPEAKER AND PROVIDE CLIENT INF	
Client Name:		Phone #:
Client Address:	City	State Zip

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Date [V/27   15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Isela bracia	n Eun Deul.
	Name of City Agency, Department, Committee	ee or Council
Do you wish to provide general p	public comment, or to speak for or against a pr	( ) Against proposal
Name:		( ) General comments
Business or Organization Affiliation	on: Eust iA Commu	vity Corpuration
Address:Street		(
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:	City	State Zip

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Date 10/27/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case N	0.
I wish to speak before the	Name of City Agency, Department, Committee	Cemmttle or Council		
Do you wish to provide gene	eral public comment, or to speak for or against a propo	osal on the agenda?	( ) For proposal	
Name:	Kenneth Sompson		( ) Against preposa ( ) General comme	
Business or Organization Aff	iliation:			
Address:				
Address:Street	City	State	Zip	
Business phone:	Representing:			
CHECK HERE IF YOU AR  Client Name:  Client Address:	RE A PAID SPEAKER AND PROVIDE CLIENT INF		w:	
Street	City	State	Zip	

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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 prop ( ) Against ( ) General ( ) Ge				
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 prop ( ) Against Name:	te 10/27/15			Agenda Item, or Case No.
Name: Representing:  CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Client Name: Phone #:  Client Address:	sh to speak before the	., 0 - 1	nittee or Council	
Street City State Zip  Business phone: Representing:  CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Client Name: Phone #:	ne: Rabbi S	ongthan Klein	proposal on the agenda?	( ) For proposal ( ) Against proposal ( ) General comments
Business phone: Representing:  CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Client Name: Phone #:	ress:Street		State	7in
Client Name: Phone #:			71	
Client Address:	ECK HERE IF YOU ARE A	AID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELO	w:
	nt Name:		PI	hone #:
One on the one of the other of	nt Address:	City	State	Zip

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Date [0 27   1T	THE CITY COUNC			Agenda Item, or Case No.
I wish to speak before the	POC Name of City Agency, De	partment, Committee	or Council	
Do you wish to provide general Name: \dagain a Anguia	public comment, or to speak			? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliati		C A	1127	
Address: 13460 VAN NV	ys BIVU. PALOIN	City UT	9 33  State	Zip
Business phone: (818) 684	1367 Representing:	LA Street	Vendors	
CHECK HERE IF YOU ARE			FORMATION BELO	ow:
Client Name:			P	Phone #:
Client Address:		City	State	Zip

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Date #0/27/15	THE CITY COUNC		Council File N	lo., Agenda Item, or Case No.
I wish to speak before the		Parel of Ment partment, Committee or C		ie .
Do you wish to provide general p				a? ( ) For proposal ( ) Against proposal ( General comments
Business or Organization Affiliation	on: LURN			
Address: 553 S_ Street	Clavence St.	City	CA	900 3.3 Zip
Business phone: 323-604	-9765Representing:	LURN		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND P	ROVIDE CLIENT INFOR	MATION BEL	OW:
Client Name:				Phone #:
Client Address:		City	State	Zip



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Date 12 27 15	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	r Council	
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenda	a? ( ) For proposal
Name:	2 Vansto	Hernand	Against proposal General comments
Business or Organization Affiliati	ion:		
Address:Street	City	State	Zip
and the same of th	Representing:		2000
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:	City	State	Zip
Stieet	City	State	Zip.

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Date [0] 27 [	5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	enda Item, or Case No.
wish to speak before		ne of City Agency, Department, Committee	or Council	
Do you wish to providence:  Business or Organization		Sophia Chuz	(	) For proposal ) Against proposal ) General comments
Address:s	itreet	City	State	Zip
		Representing:		
CHECK HERE IF YO	OU ARE A PAIL	SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:			Phone	e #:
Client Address:		A:		
S	treet	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	Comittee
	Name of City Agency, Department, Commit	ee of Council
	public comment, or to speak for or against a property of the control of the contr	
Business or Organization Affiliat	ion: A New Way of L	ife
Address:Street		
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:		Object 75-
Street	City	State Zip

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Date 10 - 27 - 15	THE CITY COUNCIL'S R DECORUM WILL BE EN	FORCED.	File No., Agenda Item, or Case No.
I wish to speak before the	Econ Devel.  Name of City Agency, Department	Com un Hee ent, Committee or Council	
Name: GREGO	ation:		( ) Against proposal ( ) General comments
Address: 9(9 /	NDIANA AVE	S. POS.	91030
Business phone:	Representing:  A PAID SPEAKER AND PROVIDE	selt ( cam	BELOW: Delegant
Client Name:			Phone #:
Client Address: Street	City	State	Zip

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			ZII IO OMEE I	51 511 1 55
Date Date	715	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		No., Agenda Item, or Case No.
I wish to speak be	fore the	Fon Develop Com Name of City Agency, Department, Committee or	mi He Council	O.R.
Do you wish to pro	ovide general	public comment, or to speak for or against a proposa	on the agen	da? ( ) For proposal
Name:		Mercid Sanchet		( ) Against proposal ( 2) General comments
Business or Organ	nization Affiliat	tion:		
Address:				
	Street	City	State	Zip
Business phone:		Representing:		
		A PAID SPEAKER AND PROVIDE CLIENT INFOR		
Client Name:				Phone #:
Client Address:	Street	City	State	Zip

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				S. S. 1.55
Date    D   S    I wish to speak before	15 re the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  Name of City Agency, Department, Committee	Econ B	e No., Agenda Item, or Case No.
Do you wish to provi	/	oublic comment, or to speak for or against a pro	posal on the age	( ) Against proposal
Business or Organiz	ation Affiliation	on:		
Address:				
	Street	City	State	Zip
Business phone:		Representing:		
		PAID SPEAKER AND PROVIDE CLIENT IN		
Client Name:				Phone #:
Client Address:	Street	City	State	Zip

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Name: Manual Sand To General () Against () General () G	Date  0 27 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
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 #:	I wish to speak before the		or Council	
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 #:		Mariente E. Lan	oosal on the agenda?	( ) Against proposal
Address:  Street  City  State  Zip  Business phone:  CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Client Name:  Phone #:	Name:	Maricia Sandre t		( ) General comments
Street City State Zip  Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Client Name: Phone #:	Business or Organization Affili	ation: Garnert worker	CR.	
Business phone: Representing:  CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Phone #:	Address:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  Phone #:	Street	City	State	Zip
Client Name: Phone #:	Business phone:	Representing:		
Client Address:	Client Name:			
Street City State Zip	Client Address:	City	State	7in

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Date 10 (27 \15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Economic Davelopment Com	ba_
	Name of City Agency, Department, Committee	or Council
Name: Warness or Organization Affilia	PRANCESCA DE LA ROSA  ation:	osal on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Address:Street	City	State Zip
	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #;

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Date 0 21 1	S DECORUN	COUNCIL'S RULES OF I WILL BE ENFORCED.	mmittee	Agenda Item, or Case No.
	Name of City Age	ncy, Department, Comm	ttee or Council	
Do you wish to provide g	eneral public comment, or t	o speak for or against a	proposal on the agenda?	( ) For proposal
Name:	To alors of	Hyman.		( ) Against proposal ( ) General comments
Business or Organization	Affiliation:	U		
Address:Stree				
Stree	t	City	State	Zip
Business phone:	Represe	enting:		
	ARE A PAID SPEAKER			
Client Name:			Ph	one #:
Client Address:Stree		City	State	Zip

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		DECORUM WILL BE ENFORCED.	13-149	13
I wish to speak befor		ne of City Agency, Department, Committee	or Council	· Committe
Do you wish to provi	de general public d	comment, or to speak for or against a prop	oosal on the agenda?	) For proposal
Name:	Fann	1 Ortiz	(	) Against proposal  ) General comments
Business or Organiz	ation Affiliation:			
Address:				
	Street	City	State	Zip
Business phone:		Representing:		
		SPEAKER AND PROVIDE CLIENT IN		ne #:
Client Address:	Street	City	State	Zip

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Date VO 2	1/15	THE CITY COUNCIL'S R DECORUM WILL BE EN		Council File N	o., Agenda Item, or Case No.
I wish to speak bef	ore the	Name of City Agency, Department	ent, Committee or C	HU	
Do you wish to pro	vide general p	public comment, or to speak for or	against a proposal	on the agend	a? ( ) For proposal
Name:	-	Marco ARU	üzu		( ) Against proposal ( ) General comments
Business or Organ	ization Affiliati	on:			
Address:					
	Street	City		State	Zip
Business phone:		Representing:			
CHECK HERE IF	YOU ARE A	PAID SPEAKER AND PROVID	E CLIENT INFOR	MATION BEL	ow:
Client Name:					Phone #:
Client Address:	Street	City		State	Zip

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Date 0 24 (5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  Name of City Agency, Department, Committee or	13-	o., Agenda Item, or Case No.  1493  Op Committee
Do you wish to provide gener	ral public comment, or to speak for or against a propose	al on the agenda	? ( ) For proposal ( ) Against proposal
Name:	Jeri Wingo		( ) General comments
Business or Organization Affil	liation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
Client Name:	E A PAID SPEAKER AND PROVIDE CLIENT INFO		OW: Phone #:
Client Address:Street	City	State	Zip

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Date 6 27 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	12 /1.0
I wish to speak before the _	Name of City Agency, Department, Commi	Committee  iittee or Council
Do you wish to provide gen	eral public comment, or to speak for or against a	proposal on the agenda? ( ) For proposal
Name:	Enlogio Mend	( ) Against proposal ( ) General comments
Business or Organization A	ffiliation:	
Address:Street		
Street	City	State Zip
Business phone:	Representing:	
OUEON HERE IS VOIL A	RE A PAID SPEAKER AND PROVIDE CLIENT	T INFORMATION BELOW:
		Phone #:

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Date   \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  E ( ) Development  Name of City Agency, Department, Committee	Council File No., Agenda Item, or Case No.  13-1493  Cammiffel  ee or Council
Do you wish to provide general Name:  Business or Organization Affilia	, , )	
Address:Street		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT I	
Client Address:Street	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File I	No., Agenda Item, or Case No
10/27/15	DECORUM WILL BE ENFORCED.	13-	1493(1)
- /		1	
I wish to speak before the	Econ Deull. Ca	le	
	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general p	public comment, or to speak for or against a propos	al on the agend	da? ( ) For proposal
			( ) Against proposal
Name: /////	100 J-81 401		General commen
	ion:		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BE	LOW:
Client Name:			Phone #:
Client Address:	211		
Street	City	State	Zip

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Date Date Date Date Date Date Date Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  Name of City Agency, Department, Committee	Econ D	Agenda Item, or Case No. 1493 ev. Comm. He
Do you wish to provide general	public comment, or to speak for or against a pro-	oposal on the agenda	? ( ) For proposal ( ) Against proposal
Name:	Blanca forez		( ) General comments
Business or Organization Affilia	tion:		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Name:	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  Name of City Agency, Department, Committee of public comment, or to speak for or against a proposed of the Council Coun	13 -/ Devel r Council sal on the agenda?	/ \ Aggingt mygnagal
Address:			
Street	City	State	Zip
Business phone:	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Address:			

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

Date   0/27		HE CITY COUNCIL'S RULES OF ECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before		City Agency, Department, Committee	ee or Council	
Do you wish to provide	e general public comr	ment, or to speak for or against a pro	oposal on the agenda?	( ) For proposal
Name:	id Levitus			( ) Against proposal ( ) General comments
Business or Organizat	ion Affiliation:			
Address:				
Address:	treet	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF YO	OU ARE A PAID SP	EAKER AND PROVIDE CLIENT I	NFORMATION BELO	w:
Client Name:			Ph	none #:
Client Address:	treet	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
10/27/15	DECORUM WILL BE ENFORCED.	13-1493 (1)
I wish to speak before the	Economic Development	- Connittee
	Name of City Agency, Department, Committee or	Council
Do you wish to provide general p	public comment, or to speak for or against a propos	
Name: David Bo.	10	( ) Against proposal General comments
Business or Organization Affiliation	on: STAPLES Center/A	E6
Address: Street	Figueroa Street L	A 0A 90015 State Zip
Business phone: 713/742-	7252 Representing: STAPLES (	enter/AEG
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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PO-27-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	e No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or C		deg Conmite
Do you wish to provide general	public comment, or to speak for or against a proposa	I on the age	nda? ( ) For proposal
Name: Casillian	Flore		( ) Against proposal ( ) General comments
Business or Organization Affiliat	> 1_ = 1		
Address: S20 W	23rd St Los Angoles	CA	90007
Business phone: 23 763-2	City	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION B	ELOW:
Client Name:			Phone #:
Client Address:	21		
Street	City	State	Zip

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Date 6/27/15	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
Do you wish to provide genera	al public comment, or to speak for or against a prop	posal on the agenda? ( ) For proposal
Name: Julie Leur	ng	( ) Against proposal ( ) General comments
Business or Organization Affilia	ation: Prevention Institute.	
	mert Blud Los Angeles City	
Business phone:	Representing: Prevention	Institute
		IFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date (b) 27	15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
l wish to speak be	fore the	Name of City Agency, Department, Committee or	mille Council	
Do you wish to pro		If public comment, or to speak for or against a propose	al on the agenda	? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Orgar	nization Affilia	ation:		
Address:	Chroni	C't.	Chata	7:
		City  Representing:	State	Zip
CHECK HERE IF	YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			F	Phone #:
Client Address:	Street	City	State	Zip

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Date 10 /27	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	The part of the last of the la	
	public comment, or to speak for or against a propo		
Name:	Usen Gonzalez		( ) Against proposal ( ) General comments
Business or Organization Affiliati	ion: LA Aren Cham	ba ct	Comor
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 10. 27.15		NCIL'S RULES OF L BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
wish to speak before the		Development Department, Committee or		
Do you wish to provide general		eak for or against a proposa	on the agenda?	( ) For proposal ( ) Against proposal
Name: To HW	HOWLAND			( ) General comments
Business or Organization Affiliati	on: CCA			
Address: <u>616</u> Street	WILSTIE #	250		
			State	Zip
Business phone: 236241	213 Representing	}:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND	PROVIDE CLIENT INFOR	RMATION BELO	w:
Client Name:			Ph	none #:
Client Address:				
Street		City	State	Zip

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EXCENTIONIE EXTENT REGESSANT FOR THE PRESIDING OFFICER TO GALE OF ON TOO
Date   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 Council (6 40 to to 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
Name: BRIAN DRR (*) Against proposal (*) General comments
Business or Organization Affiliation: Properly owner  Address: 1809-1827 occur from the Very Very CE (A 9029)  Street City State Zip
Address: 1809-1827 ocen from + crak LA Ventice (A 9029)
Business phone: 313 907 3 555 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 OCH 27, 2015  I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  CONOMIC Development Name of City Agency, Department, Committee	I Hemi	Agenda Item, or Case No.
Do you wish to provide general p	public comment, or to speak for or against a pro	oposal on the agenda?	( ) For proposal ( Against proposal
Name: Haera Tes	Slee		General comments
Business or Organization Affiliati	on: CA RESTAURANT	HSSDCIOTIO	<u> </u>
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELO	w:
Client Name:		Pt	none #:
Client Address:Street	City	State	Zip
Sileet	City	State	ZIP

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Date 10/27/15	THE CITY COUNCIL'S F		Council File No.,	Agenda Item, o	or Case No.
I wish to speak before the	Name of City Agency, Department	ent Committee o	r Council		
Do you wish to provide general Name:	public comment, or to speak for or			<b>Against</b>	oosal proposal comments
Business or Organization Affilia Address:		#130	WESTCH	ESTRA	90045 , CA
Street	City  Representing:		State	Zip	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVID	DE CLIENT INFO	ORMATION BELOV	v:	
Client Name:			Pho	one #:	
Street	City		State	Zip	