15-1138-51

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Date 2 9 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 Council	
Do you wish to provide general	public comment, or to speak for or against a prop	osal on the agenda?	? () For proposal
Name:	Pete White		() Against proposal() General comments
Business or Organization Affilia	/		
Address:Street			
		State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELO	w:
Client Name:		P	hone #:
Client Address:Street	0"	0: 1	7
Street	City	State	Zip

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EXCELLIOI	THE EXTENT NEOLOGATITY OF THE THEOLOGICA	STITULE TO CALL OF ON TOO
Date &-9-16	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
Do you wish to provide general p	public comment, or to speak for or against a pro	
Business or Organization Affiliati	ion: HARBOR INTERFAITH - C	ES (SPA 8)
Address: 670 W. 9TH S	ST. SAN PEDRO City	CA 90731 State Zip
	Place Int	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION 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.
2/9/2016	DECORUM WILL BE ENFORCED.	Hem # 6
I wish to speak before the	Name of City Agency, Department, Committee or	Council
	public comment, or to speak for or against a proposa	al on the agenda? () For proposal
Name: EVa Willia	ams	() Against proposal () General comments
Business or Organization Affiliati	ion: CSH	
Address: 800 S. Fo	veros Street, Suite 81	Old Sign 90013
Business phone: 213-673	74347 Representing:	
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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Date Q (()	THE CITY COUNCIL'S RIDECORUM WILL BE ENFO	ORCED.	Item	Agenda Item, or Case No.
Name: La Cheryl	Porter on: St Joseh	against a proposal on	the agenda?	(×) For proposal() Against proposal() General comments
Address:		VOICE	CA	90791
Street	City	VENTICE	State	Zip
Business phone: 510 · 596 · L	Representing: St	Jerefle Cont	e	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	E CLIENT INFORMA	TION BELOV	w:
Client Name:			Ph	one #:
Client Address:	City		State	Zip
Sileet	City		State	Zip

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Date Q Q I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. When the City Agency, Department, Committee	6	Agénda Item, or Case No.
	ublic comment, or to speak for or against a prop		For proposal
Name: Steph	anie Klasky-Game		() Against proposal() General comments
Business or Organization Affiliatio	n: LA Family +	tousing	
Address:			
Street Business phone: \$18-355-	City Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELO	w:
Client Name:		Pr	none #:
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, Commi	ittee or Council
Do you wish to provide genera	al public comment, or to speak for or against a	proposal on the agenda? (For proposal () Against proposal
Name: Zahlah	Manh	() General comments
Business or Organization Affili	iation: Knihd way of Greater LA	}
	,	
Business phone: 213.60	J. 6/1/2 LA City City United	way Home in Good
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	0.4	7
Street	City	State Zip

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Date 2 - 9 - 16	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, Comm	ittee or Council
Name: Devocation Affiliation Affiliation Affiliation	al public comment, or to speak for or against a Zelinsky jation: Coperations for Shorne PI Pacional City	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 #:
Client Address:Street	City	State Zip

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Date Date Date Date Date Date	THE CITY COUNCIL'S RUDECORUM WILL BE ENF	LLO OI	cil File No., Agenda Item, or Case No.
	Name of City Agency, Departmen	t, Committee or Council	
Name: 5/34		gainst a proposal on the a	agenda? () For proposal () Against proposal () General comments
Business or Organization Aff	filiation: 5/11/00 E		
Address:Street	12620 Villey City -570 City Representing:	Com Csty C State	A 90230 te Zip
Business phone:	Representing:		
	RE A PAID SPEAKER AND PROVIDE		
Client Name:			Phone #:
Client Address:			
Street	City	Stat	te Zip

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Date 2.9.16	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 pul	blic comment, or to speak for or against a propo	osal on the agenda? () For proposal
Name: Pschy	Dennison : Verrice Community	() Against proposal (General comments
Business or Organization Affiliation	:: Verrice Community }	tonsing
Address:		
Street	City	State Zip
Business phone:	Representing:	
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 2/9/16	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	e or Council	
	ublic comment, or to speak for or against a pro		
Name: Jerru	Jones		() Against proposal () General comments
Business or Organization Affiliation	Jones On: Inner City Law Ce- The 8th Los Angeles, City	tu	
Address: 1309 E.	7th 8th Los Angeles	CA	90021
Business phone 2/3 89/	- 2880 Representing:	State	Σιρ
	PAID SPEAKER AND PROVIDE CLIENT IN		
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 02/09/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	committee	
Do you wish to provide general p	public comment, or to speak for or against a	a proposal on the agenda	? () For proposal
Name: Deirdre Ho			() Against proposal (x) General comments
Business or Organization Affiliation	on: Good Shepherd Sh	elter	
Address: 2561 VEV	rice Blvd. Las Angel	es CA State	90044 zip
Business phone:	Representing:		
	PAID SPEAKER AND PROVIDE CLIEN		ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip

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Date 2/9/16	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	or Council
Do you wish to provide generation	al public comment, or to speak for or against a propo	sal on the agenda? () For proposal
Name: Rusiness or Organization Affilia Address: Street Business phone: 212	iation: Deller Parlershy) So Strond Ave LA 900 WEST Representing: Sheller Parlershy	() Against proposal () General comment
CHECK HERE IF YOU ARE	E A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date / //		Council File No. Accorde North or Cook No.
	CORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	ity Agency, Department, Committee	or Council
/		
Do you wish to provide general public comme	ent, or to speak for or against a pro	posal on the agenda? () Against proposal
Name: Josh Hbres	K-13611	() General comments
Business or Organization Affiliation:	ne , ,	
Address: 655 S. Fall	of CA	CH 9601/
Street Street F	Representing: City M VSP H	Staté Zip
CHECK HERE IF YOU ARE A PAID SPE		FORMATION BELOW:
Client Name: 05 H	AL-BREK-S	O N Phone #:
Client Address:		
Street	City	State Zip

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Date 2/9/16	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 o	r Council	
Name:	public comment, or to speak for or against a propos	sal on the agenda	? (For proposal) Against proposal () General comments
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:	City	State	Zip

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Date 2/9/16 I wish to speak before the		OUNCIL'S RULE VILL BE ENFOR		Council File	No., Agenda Item- or Case No.
i wish to speak before the	Name of City Agend	-1/	Committee or	Council	
Do you wish to provide general posterior Name: Yerry Ne		speak for or aga	inst a proposa	I on the agen	da? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Home	For Good	Buness	Loders	Task Porce
Address: // So Street	· Olive	2A		CA	90004 900/5 Zip
Business phone:	Represent	ing: Home	- For 600	od	
CHECK HERE IF YOU ARE A					LOW:
Client Name:					Phone #:
Client Address:Street		City		State	Zip

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Date		ORUM WILL BE ENFORCED.	Council Fi	e No., Agenda Item, or Case No.
I wish to speak before th		Agency, Department, Commit	tee or Council	
Do you wish to provide of	general public commen	t, or to speak for or against a p	roposal on the age	nda? For proposal
Name:	avio Cha	ney		() Against proposal () General comments
Business or Organization	n Affiliation:			
Address:	454 Vale	whipe ST City	(A State	CA 90026
Business phone: 32	3 309 13 12 RE	epresenting:	1+	
CHECK HERE IF YOU	ARE A PAID SPEA	KER AND PROVIDE CLIENT	INFORMATION B	ELOW:
Client Name:				_ Phone #:
Client Address:	-1	Cib.	OI-1-	7:
Stre	₽l	City	State	Zip

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Date 2/9/16	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 of	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: Aaron	Smenez		Against proposal General comments
	tion: Central City Associat		
Address: 626 W	Ishire Blad Sufe 200 Los Ang	eles CA State	70017
	- 7512 Representing: CCA	State	214
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			-
Street	City	State	Zip

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2/9/2016		UNCIL'S RULES OF ILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before the	MNCM Name of City Agency	, Department, Committee	or Council	4-
Do you wish to provide general pu		peak for or against a prop	oosal on the agend	a? (X) For proposal () Against proposal () General comments
ل Business or Organization Affiliation			Public (Counsel
Address: <u>UV S Avdr</u> Street Business phone: <u>213-385-2</u>	MOYE AVE 1977 KITS Representi	city ng: Public Cann	State	9000S
CHECK HERE IF YOU ARE A	PAID SPEAKER AN	ID PROVIDE CLIENT IN	FORMATION BEL	ow:
Client Name:				Phone #:
Client Address:Street	<u>-</u>	City	State	Zip

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Date 2 9 6	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	
Nama: Ann-Saphie Morris	blic comment, or to speak for or against a proposed settle Downtown Women's Center	osal on the ager	nda? (V) For proposal () Against proposal () General comments
Business or Organization Affiliation Address: 442 S. San M.	DOWNLOWN WOMEN'S CENTER Dedw. St. City	CA	90037
Street Business phone: 2[3 · 2[3 · 286]	City Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BE	ELOW:
Client Name:			_ Phone #:
Client Address:Street	City	State	Zip

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Date 9 Feb 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, o	r Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	or Council		/
Do you wish to provide general p	oublic comment, or to speak for or against a propo	sal on the agen	() Against	osal proposal comments
Business or Organization Affiliation Address:	on: S. Min St.	1330	C.A.	9001-
Street	City Representing:	State	Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BE	LOW:	
Client Name:	· · · · · · · · · · · · · · · · · · ·		Phone #:	
Client Address:Street	City	State	Zip	

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2/9/16	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 Gity Agency, Department, Committee of	or Council	
Do you wish to provide general pub	lic comment, or to speak for or against a propo	sal on the agenda	? () For proposal
Name: Mee Heh Ris	don		() Against proposal () General comments
Business or Organization Affiliation:			
Address: Street Street	og (o Angeleg	State	90017 Zip
Business phone: 213-623-430	Representing: C5+		
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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2/9/10	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	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: LAURA HIL			Against proposal General comments
Business or Organization Affiliation	on: SOUTH PARK BID		
Address: 100 S Ft Street	DWEIR ST	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	ow:
Client Name:		P	Phone #:
Client Address:Street	City	State	Zip

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- / 2 /	HE CITY COUNCIL'S RULES OF ECORUM WILL BE ENFORCED.		No., Agenda Item, or Case No.
I wish to speak before the LA _C Name or	f City Agency, Department, Committee	e or Council	
Do you wish to provide general public com	ment, or to speak for or against a pro	posal on the agend	da? () For proposal
Name: Mauren Kris H.	alikis		() Against proposal () General comments
Business or Organization Affiliation: _ B c	Entwood Spiritual	Studies Ir	stitute
Address: Po Box 49338 Street	- LA City	C A State	90049
Business phone: 42 4 6 44 75 94	Representing: women who a	re Victura 16	Lever
CHECK HERE IF YOU ARE A PAID SE			
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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2/9/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. Agenda Item#6
I wish to speak before the	Los Angeles City Council Name of City Agency, Department, Committee of	J
	name of City Agency, Department, Committee of	or Council
	public comment, or to speak for or against a propo	osal on the agenda? () For proposal () Against proposal
Name: Loah Gass	ser-Ordaz	General comments
Business or Organization Affilia	tion: Public Counsel	
Address: 60 S.	Ardmore Ave. Los Angeles	CA 90005
Business phone: 2\3-38\3	Ardmore Ave. Los Angeles, 5-2977 Representing: Public Cou	insel State Zip
	A PAID SPEAKER AND PROVIDE CLIENT INF	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date		COUNCIL'S RULES OF WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No.
I wish to speak before the		/		
	Name of City Age	ncy, Department, Committe	ee or Council	
Name: Kei 4	eneral public comment, or to SUMI Affiliation:			For proposal Against proposal General comments
Address:				
Street		City	State	Zip
Business phone:	Represe	nting:		
CHECK HERE IF YOU	ARE A PAID SPEAKER	AND PROVIDE CLIENT I	NFORMATION BELOV	v:
Client Name:			Pho	one #:
Client Address:				
Street		City	State	Zip

THE CITY COUNCIL'S RULES OF

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

Date

DECORUM WILL BE ENFORCED.
wish to speak before the
o you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal () Against proposal () General comments
usiness or Organization Affiliation: TVMAN PIGHT TO HOVSING COLLECTIVE
ddress: 838 E WTH STREET / 90027 State Zip
usiness phone: Representing:
HECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:
ient Name: Phone #:
ient Address: Street City State Zip

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

NOTE: THIS IS A PUBLIC DOCUMENT.

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Date O 9 16 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee or	Council File No., Agenda Item, or Case No.
Do you wish to provide general pu	ublic opniment, or to speak for or against a propose	
Name: KWAZI	NERUMAH.	() Against proposal () General comments
Business or Organization Affiliatio	n: ME Cacutas To	Edlo Park N.C.
Address: 1701 M	ORTON Are. LA.	90026
Business phone: 213-40	09155 Representing: MLK + E	Euro Par De N. C.
0	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 2-9-2016	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: Pastor C Business or Organization Affilia	al public comment, or to speak for or against a proportion. UE JuMari Church without was		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:			
Street	City	State	Zip

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Date 02/05/2016	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 or	Council	
Do you wish to provide general put	blic comment, or to speak for or against a propos	al on the agenda	a? () For proposal
	bellA (Frenchy)		() Against proposal () General comments
Business or Organization Affiliation	: DWAC GO-CHAI	RZ	
Address:	LACAN COMMUN	My or	AN ZER
Street	City	State	Zip Palto P
Business phone:	Representing:		IN FEAT
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 2/9/16	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, Commit	tee or Council	
	public comment, or to speak for or against a p	proposal on the agenda?	For proposal Against proposal General comments
Business or Organization Affiliation	Or In		
Business phone: Street 213 76	7-698 Representing:	State	Zip
	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW	/ :
Client Name:		Pho	one #:
Client Address:	City	State	Zip

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Date 2 9 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	Council	
	ll public comment, or to speak for or against a propos		() Against proposal
Name:	Wesley Walker		() General comments
Business or Organization Affilia	ation: LA CAN		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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Date 2 9 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 Council	
Do you wish to provide genera	al public comment, or to speak for or against a propo	osal on the agenda	? () For proposal
Name:	Dogon LACAN		() Against proposal () General comments
Business or Organization Affili	iation: LACAN		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	w:
Client Name:	Í.	P	hone #:
Client Address:	City		
Street	City	State	Zip

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Date 2 9 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 Council	
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda?	() For proposal
Name:	Graig Roberts		() Against proposal() General comments
Business or Organization Affiliat			
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INF		
Client Name:		Pr	none #:
Client Address:			

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. /		
Date 2/9/16	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	or Council
Do you wish to provide general put Name: En C Av	olic comment, or to speak for or against a propo	osal on the agenda? () For proposal () Against proposal () General comment
Business or Organization Affiliation	LACAN	
Address: \$38 E.6+L	. 90021 city	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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		SELL TO CHEE STOLL TOO
Date 02 09 16	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	r Council
Name: AZA Business or Organization Affiliat Address: Street	public comment, or to speak for or against a propose ion: MCOAUMAN COAUMAN City City	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Do you wish to provide general public	ame of City Agency, Department, Committee of comment, or to speak for or against a propor	oltem nucl ir Council sal on the agenda?	() Against proposal
Business or Organization Affiliation:	ammad		() General comments
Address: 3933 Street	h Bugnson alle City Representing:	State	Zip
	Representing:		w:
Client Name:		Ph	none #:
Client Address:Street	City	State	Zip

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Business or Organization Affiliation: Address: Street City State Zip Business phone: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Date 2 9 5 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Owner Name of City Agency Department, Committee of		., Agenda Item, or Case No.		
Name:	Do you wish to provide gener					
Address: Street City State Zip Business phone: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:		Pete While		() Against proposal () General comments		
Address: Street City State Zip Business phone: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address:	Business or Organization Affil	iation:				
Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Address:					
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Street	City	State	Zip		
Client Name: Phone #:	Business phone:	Representing:				
Client Address:						
Client Address:	Client Name:			'none #:		
Oligot Oligo Oligo Oligo Alb	Client Address:Street	City	State	Zip		

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Date 9 Flb 2 db I wish to speak before the Name	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. The of City Agency, Department, Committee		, Agenda Item, or Case No.	
	comment, or to speak for or against a prop	oosal on the agenda?	() For proposal () Against proposal	
Name:	as GAREA		() General comments	
Business or Organization Affiliation:	Self S. min st	+1336	C.H.	
Street	City	State	Zip	
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Ph	none #:	
Client Address:	City	State	Zip	
Ollegi	Olty	State	-ip	

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Date 02/69/1C I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
Nam	e of City Agency, Department, Committee or	r Council	
Name: Sisan Rosson	comment, or to speak for or against a propos	sal on the agenda	? () For proposal () Against proposal () General comments
Business or Organization Affiliation:			
Address: 6666 92000 V11	usy (R. Cozum Gy, CD	70,23	0
Business phone: 30-54-5270	City Representing:	State	Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date 2 9 b	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
	Name of City Agency, Department, Committee	ee or Council
Name: PATTER		() Against proposal () General comments
Business or Organization Affiliati	ion:	
Address:Street		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	
Client Address:		
Street	City	State Zip