08-0923-517

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| Date 6/8/12 | 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 | Public Safety | | |
| | Name of City Agency, Department, Committee or 0 | Council | |
| Do you wish to provide general p | oublic comment, or to speak for or against a proposa her Koontz on: <u>COS-Paul Koretz</u> | l on the agenda | a? (>>) For proposal () Against proposal () General comments |
| Business or Organization Amiliati | on: Coo raut have a | | |
| Address: | | | |
| Address:Street | City | State | Zip |
| Business phone: | Representing: | | |
| • | A PAID SPEAKER AND PROVIDE CLIENT INFOF | | ow: |
| Client Name: | | F | Phone #: |
| Client Address: | | | |
| Street | City | State | Zip |

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| Date 6/9/12 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No. | , Agenda Item, or Case No. | | |
|--|--|------------------|----------------------------|--|--|
| I wish to speak before the | PUBLIC SAFをTY Name of City Agency, Department, Committee of | or Council | | | |
| Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? (-) For proposal | | | | | |
| | | | () General comments | | |
| Business or Organization Affiliation: RESIDENT | | | | | |
| Address:Street | City | State | Zip | | |
| | Representing: | | | | |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: | | | | | |
| Client Name: | | P | hone #: | | |
| Client Address: | City | Ctota | Yes | | |
| Street | City | State | Z ip | | |

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

| Date 6/8/12 | | ICIL'S RULES OF BE ENFORCED. | Council File No | ., Agenda Item, or Case No. |
|--|-------------------------------------|--|------------------|--|
| I wish to speak before the | Public Sa Name of City Agency, E | fety Meeting Department, Committee or | Council | |
| Do you wish to provide general p | oublic comment, or to spe | ak for or against a proposa | al on the agenda | ? () For proposal |
| Name: Kristin Fi | ndley | | | (/ Against proposal () General comments |
| Business or Organization Affiliati | on: | | | |
| Address: 4646 Street Business phone: 702-423-1 | Los Felix Blvd | Los Angeles | State | 90007 Zip |
| Business phone: 702-423-1 | 3344 Representing | : myself | | ' |
| CHECK HERE IF YOU ARE A | | · | | |
| Client Name: | | | P | hone #: |
| Client Address: | | City | State | 771.0 |
| Street | | City | State | Zip |

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| EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU |
|---|
| Date 8/12 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Council File No greenda Item, or Case No. |
| I wish to speak before the RBIC SAG COMTEE |
| Name of City Agency, Départment, Committee or Council |
| Do you wish to provide general public comment, or to speak for or against a proposal on the agenda |
| Name: Stewart Richly General comments |
| Business or Organization Affiliation: Set, afforms faring Aswards |
| Business or Organization Affiliation: Sett, Gtorny, Parish Associate Address: Street City City State Zip |
| Address: Street City State Zip Business phone: 310 6999392 Representing: Self + Novsuls of Parket Chiens |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: |
| Client Name: Phone #: |
| Client Address: |
| Street V City State Zip |

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| Date $(5-8-17)$ I wish to speak before the | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Rouncil File No | o., Agenda Item, or Case No. | | |
|--|---|-------------------|---|--|--|
| ľ | Name of City Agency, Department, Committee o | | | | |
| Do you wish to provide general pub | lic comment, or to speak for or against a propos | sal on the agenda | ? () For proposal | | |
| Name: DX VID | HEAMA | | () Against proposal () General comments - | | |
| Business or Organization Affiliation: | | 2 | | | |
| Address:Street | / _/ | CA | | | |
| Street | City | State | Zip | | |
| Rusiness phone: | Representing: | | | | |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: | | | | | |
| Client Name: | | F | Phone #: | | |
| Client Address: | Att. | 0/-1- | 7 | | |
| Street | City | State | Zip | | |

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| Date (4/9/12 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File No., Agenda Item, or Case No. |
|--|--|--|
| I wish to speak before theN | Public Suffry Complante of City Agency, Department, Committee or | |
| • | | |
| Do you wish to provide general publ | lic comment, or to speak for or against a proposa | al on the agenda? () For proposal |
| | | |
| Name: [NTAV] Q S | Kirchheimer | () General comments |
| Name: | | |
| Business or Organization Affiliation: | | |
| Address: 416 My5 | pum Drive LosAngph | PS A 90065 State 2ip |
| Business phone: | Representing: | |
| | | |
| CHECK HERE IF YOU ARE A PA | AID SPEAKER AND PROVIDE CLIENT INFO | RMATION BELOW: |
| Client Name: | | Phone #: |
| 4-11-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | |
| Client Address: | | |
| Street | City | State Zip |

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| | | | , | |
|--------------------------------------|--|----------------------------|---------------------|--------------------------|
| Date | THE CITY COU | NCIL'S RULES OF | Council File No., | Agenda Item, or Case No. |
| 6/8/15 | DECORUM WIL | L BE ENFORCED. | | 7 |
| | Λ ι. | (() (| | |
| I wish to speak before the | Public | Safety Con | nmittee | |
| I Wish to speak before the | | Department, Committee | | · |
| | reamo or only rigorioy, | oparanoni, committo | or oburion | |
| Do you wish to provide general p | oublic comment, or to spe | eak for or against a prope | osal on the agenda? | () For proposal |
| | ei Gagné-Ke | | | (X) Against proposal |
| Name: | <u>el vagne - Ne</u> | 41) | | () General comments |
| During a Constitution Affiliation | -m. | | | |
| Business or Organization Affiliation | on: | 1 1 | C 10 | Clar. A |
| Address: 4646 Los | Feliz Blud | LH- | C/A | 90027 |
| Street | ^ | City | State | Zip |
| Business phone: 805-43 | 1-684 Representing | ı: | | |
| | The state of the s | | | |
| CHECK HERE IF YOU ARE A | PAID SPEAKER AND | PROVIDE CLIENT INF | FORMATION BELO | W: |
| | | | | ,, |
| Client Name: | · | | Pr | none #: |
| Client Address: | | | | |
| Client Address: | | City | State | Zip |

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| Date 6 8 12 | THE CITY COUNCIL DECORUM WILL BE | | Council File No., Age | enda Item, or Case No. |
|---|-------------------------------------|--|-----------------------|--|
| I wish to speak before the | Name of City Agency, Depa | FETY MEETING THE PROPERTY OF COMMITTEE OF CO | oungil | |
| Do you wish to provide general posts of the Name: | 1 Grcevic | | |) For proposal) Against proposal) General comments |
| Business or Organization Affiliation | | | | |
| Address: 2905 G | racia LA | C | A 9 | 0039 |
| Street | Ci | ty | State | Zip |
| Business phone: | Representing: | | | |
| CHECK HERE IF YOU ARE A | | VIDE CLIENT INFOR | MATION BELOW: | |
| Client Name: | | | Phon | e #: |
| Client Address: | Ci | tv | State | Zip |

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| Date 6/8/12 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | Council File | No., Agenda Item, or Case No. |
|--------------------------------------|---|--------------|-------------------------------|
| I wish to speak before the | Rollic Safety Commits | | |
| | Name of City Agency, Department, Committee or | Council | |
| | oublic comment, or to speak for or against a proposa | | |
| | | | |
| Business or Organization Affiliation | on: | | |
| Address: | | | |
| Address:Street | City | State | Zip |
| Business phone: | Representing: | | |
| CHECK HERE IF YOU ARE A | A PAID SPEAKER AND PROVIDE CLIENT INFOR | rmation be | LOW: |
| Client Name: | | | Phone #: |
| Client Address:Street | City | State | Zip |

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| le - 8-12 | THE CITY COUNCIL'S RUI DECORUM WILL BE ENFO | | Council File No., | Agenda Item, or Case No. |
|--------------------------------------|--|----------------------|-------------------|---------------------------------------|
| I wish to speak before the | Public Safet | y Mace | etinos | |
| | Name of City Agency, Department | , Committee or Cou | incii 🜙 | • |
| Do you wish to provide general p | oublic comment, or to speak for or a | gainst a proposal on | the agenda? | (X) For proposal |
| Name: Name: | B. SMA | IEA | · | Against proposal General comments |
| Business or Organization Affiliation | on: NADA B | , SMAI | IEY | DBA |
| Address: 12640 M | EN/O Ave Ap | + D HAW | Hundy C | A-98250 |
| Street Business phone: 717 35 | 7 8 48 Representing: | Self | State / | Zip |
| - | | | | |
| CHECK HERE IF YOU ARE A | PAID SPEAKER AND PROVIDE | CLIENT INFORMA | ATION BELOV | V: |
| Client Name: | | | Pho | one #: |
| Client Address: | | | | |
| Street | City | | State | Zip |

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| | _ | | | | |
|--|---|-------------------------|---------------------|---|--|
| Date 6/8 | THE CITY COUNC DECORUM WILL B | | Council File N | o., Agenda Item, or Case | ; No. |
| I wish to speak before the | Public Safety Name of City Agency, Dep | Meetha Meetha | Council | |) ′ |
| Do you wish to provide general posterior Name: | oublic comment, or to speak | for or against a propos | al on the agenda | a?()For proposal () Against propo () General comr | |
| Address: 806 CX | onado Terra | ce LA, | CA _{State} | 900 26 | |
| Business phone: | | | | | anning of the second se |
| CHECK HERE IF YOU ARE A | A PAID SPEAKER AND PR | OVIDE CLIENT INFO | RMATION BEL | ow: | |
| Client Name: | | | | Phone #: | |
| Client Address: | 1 | City | State | Zip | |





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| Date G-8 | THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. | | , Agenda Item, or Case No. | |
|--|---|---------|--|--|
| I wish to speak before the | City 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 () Against proposal () General comments | | | | |
| Business or Organization Affiliation | on: | | ************************************** | |
| Address:Street | | | | |
| Street | City | State | Zip | |
| Business phone: | Representing: | | | |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: | | | | |
| Client Name: | | P | none #: | |
| Client Address: | | State | 7in | |



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| | | | | , | |
|------------------------------------|---|--|----------------|--|--|
| 6/8/2012 | THE CITY COUNCIL'S DECORUM WILL BE E | Council File No., Agenda Item, or Case No. | | | |
| I wish to speak before the | PUBCZC SAFE Name of City Agency, Departr | | | É | Marie Carlotte Communication C |
| Do you wish to provide general p | _ | or against a proposal | on the agenda? | P () For proposal () Against propos () General comm | |
| Business or Organization Affiliati | | | | | |
| Address: 11705 VEX | City | TUDIO CZ | State State | 9/604 Zip | |
| Business phone: 818 50 S | | | MATION BELO | w: | *************************************** |
| Client Name: | | *************************************** | P | none #: | |
| Client Address:Street | City | | State | Zip | |

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| | | - | | |
|---|-------------------------------|----------------------------|----------------|--|
| Date / | THE CITY COUNCIL | 'S RULES OF | | Agenda Item, or Case No. |
| 6/8/2012 | DECORUM WILL BE | E ENFORCED. | せる タナレーノフィフ | \$111737 SI |
| Wish to speak before the | WELL SAGETU | Committee | C 08-0 | 1923-517 |
| | Name of City Agency, Depart | artment, Committee or Co | ouncil | |
| Do you wish to provide general Name: Sama I | public comment, or to speak f | or or against a proposal c | on the agenda? | For proposal Against proposal () General comments |
| Rusiness or Organization Affiliat | ion Self | | | |
| Address: 6951 Ke | SEDA BL | RESENA | CA | |
| Address: 6951 Re Street Business phone: | Representing: | ity Self | State | Zip |
| CHECK HERE IF YOU ARE | | | | w: |
| Client Name: | | | PI | none #: |
| Client Address: | | | | |
| Street | C | ity | State | Zip |