Date /-2/ - //2	THE CITY COL	INCIL'S RULES OF	Council File N	lo., Agenda Item or	Case No.
1-26-10	DECORUM WII	L BE ENFORCED.	1400 4C	Comment	<u></u>
	1	u A el	CF	08-09/2	Ź
I wish to speak before the	Angeles City Agazay	Ty Counci Department, Committee	ar Coupoil		
		,			
Do you wish to provide general public	lic comment, or to sp	eak for or against a prop	oosal on the agend	a?()For propo ()Against p	
Name: David Burke		·		( <b>&gt;&gt;</b> _General o	comments
Business or Organization Affiliation:					
Address: 1100 S. 2nd	d St.	Alhambra	CA	91801	
Address: 1/00 S. 2nd Street  Business phone:	Representin	g: Medical M	lwoj uand	Patients	Right
CHECK HERE IF YOU ARE A PA			V		
Client Name:				Phone #:	
Client Address:					
Street		City	State	Zip	
Please see reverse of card for in	mportant information	and submit this entire ca	ard to the presiding	officer or chairp	erson.
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Ci	TY OF LOS A	NGELES SPEAKE	ER CARD		
Date	THE CITY COLL	NCIL'S RULES OF	Council File N	o., Agenda Item, or 0	Case No.
25 Jan 09		L BE ENFORCED.	Item	2	
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I wish to speak before the	ty Council	,			
N	ame of City Agency,	Department, Committee	or Council		
Do you wish to provide general publi		eak for or against a prop	osal on the agenda	a? ( ) For propos	sal .
Name: MiKKi Killi	ingsworth			(★) Against pr ( ) General c	
Business or Organization Affiliation:	•				
Address: 18320 Sheri	man Way	Roseda	CA 913	35	
Address: 18320 Sheri Street Business phone: 310 994965	7 Depresenting	City	State	Zip	
				F	***************************************
CHECK HERE IF YOU ARE A PA	ND SPEAKER AND	PROVIDE CLIENT INF	FORMATION BEL	OW:	
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Date // 26/09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Agenda Item, or Case No.
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	4 City Council		
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,	public comment, or to speak for or against a prop	· ·	Against proposal
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Business or Organization Affilia	tion: <u>Camera History rosers</u>	LORXIID	<u> - 1204/15                                    </u>
	1 Suncional City - 91	•	
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Business phone: 805 497	287/ Representing:		
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Client Name:		Pi	none #:
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Date	CITY OF LOS ANGELES SPEAKE  THE CITY COUNCIL'S RULES OF		Agenda Item, or Case No.
126.JHW	DECORUM WILL BE ENFORCED.	4/	
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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 prope	osal on the agenda?	( ) For proposal
Name: JAIME	GRELA	_	( ) Against proposal  General comments
	MRCE 19		
Business or Organization Affiliat	ion: patient mm;		
Address: 412 E	-Ithst LA	CA State	90013
Business phone: 213 688	2053ZRepresenting: Pation45	State	Zib
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOV	/:
Client Name:	A	Ph	one #:
Client Address:Street	City	State	Zip

1-26-10	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 or	Council
Do you wish to provide general	public comment, or to speak for or against a proposa	al on the agenda? ( ) For proposal ( >>>> Against proposal
Name: Kim Nev	rermann	( ) General comments
Business or Organization Affiliat	tion: Medical Manifuana	patient
Address: 5/6 S /	Nan LA City  Representing: Ø:then	CA 900/3 State Zip
Business phone:	Representing: Other	patients
	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:Street		
Street	City	State Zip
	CITY OF LOS ANGELES SPEAKER	CARD
1/26/10	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 or C	Council
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Business or Organization Affiliati	on:	
Address: Poblished	1 1 1 / august Dalar.	
Business phone:	City CONOCH PORK	State Zip Zip
	Representing:	State C11304
CHECK HERE IF YOU ARE A	Representing:  PAID SPEAKER AND PROVIDE CLIENT INFOR	
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·	PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW:

Date	·	Council File N	o., Agenda Item, or Case No.
1-26-10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		2-08-923
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1 wish to speak before the	.A. CITI COUNCIC  Name of City Agency, Department, Committee or	Council	
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	al on the agenda	
Name: WILLIAM (			( + Against proposal ( ) General comments
Business or Organization Affiliation	on: Sylmar CARE GIVE MERCEST. TUJANGA City	ees	
Address: 10638 COMA	MERCE ST. TUJANGA	CA	Zip
Business phone: 8/8-233	4567 Representing: MySOLF	State	Ζιp
	PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BEL	ow:
			Phone #:
Client Address: Street	City	State	Zip
Please see reverse of card fo	or important information and submit this entire card	to the presiding	officer or chairperson.
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(	CITY OF LOS ANGELES SPEAKER	CARD	
Date / Oc / a	THE CITY COUNCIL'S RULES OF	Council File No	., Agenda Item, or Case No.
1/28/2010	DECORUM WILL BE ENFORCED.	ITEM 2	108-0923
			/
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•	Name of City Agency, Department, Committee of	Council	
	ublic comment, or to speak for or against a proposal	on the agenda	? ( ) For proposal (X) Against proposal
Name: Benjamin Le	x nex		() General comments
Business or Organization Affiliatio	n:		
Address: 2120 B. AU	ST GMAUHILL	A	90755
Susiness phone: GD 972-4	GNAV HU  City  Representing:	State	Zíp *
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
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Date 01-26-10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
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Name: (VARL	public comment, or to speak for or against a proposa  (Lives  ion: Pare Gi	( ) Against proposal ( ) General comments	
Address: 122 Street  Business phone: 877-219	S. CINCOLN Blud # 204		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:	
Client Name:		Phone #:	
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Date 1.26:10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $\mathcal{A}$	
I wish to speak before the	Name of City Agency, Department, Committee or C	Douncil	
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: California Alternative Careavers			
Address: 122 Street	City	State Zip	
Business phone: <u>\$77.219</u>			
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Client Name:		Phone #:	
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date 1 3.6.10	THE CITY COUNCIL'S RULES OF	-	Agenda Item, or Case No.
1, 20, 12	DECORUM WILL BE ENFORCED.	Ĺ	<u> </u>
wish to speak before the	Name of City Agency, Department, Committee of		
	Name of City Agency, Department, Committee of	or Council	
	oublic comment, or to speak for or against a propo		( ) For proposal
Name:	American Therefore		<ul><li>( ) Against proposal</li><li>( ) General comments</li></ul>
	ion:		
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Jilent Name:		PII	one #:
Client Address:Street	City	State	Zip
Date / /	CITY OF LOS ANGELES SPEAKEI  THE CITY COUNCIL'S RULES OF		Agenda Item, or Case No.
1,26,18	DECORUM WILL BE ENFORCED.		
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wish to speak before the	Name of City Agency, Department, Committee of	or Council	
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, , ,		-	Against proposal     General comments
Name:	11.00 15.72.00 140		( ) General comments
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Date Solution	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	
Name:	Lyon Donner	( ) Against proposal ( ) General comments
Business or Organization Affilia	ation:	
Address:Street	City	State Zip
· ·	Representing:	<b>'</b>
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	CITY OF LOS ANGELES SPEAKER	
Date / 26 / 8 9	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
wish to speak before the	City Council Meet	ting
	Name of City Agency, Department, Committee o	
	public comment, or to speak for or against a propos	(Against proposal
lame: LORING	CREEKS	( ) General comments
Business or Organization Affilia	tion: The costs for AFE	HECKES .
Address: <u>3626</u>	INT CLIZABETH KOA	D. Glassile CH-91
susiness phone (3/8) 276	-3677 Representing: Mulica	Cos. fa tronts
HECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:
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Date (-26-10	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 or	Council
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Address: 12 c1 57 U	: Compussionnte Care of S Untura Blud Studi	State Zip
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	lic comment, or to speak for or against a proposal	on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:		
Address: 12505.WESTE	RNF4210 LA	90006 State Zip
Business phone: 323733 45	Representing: SUF	Ciato Lip
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date 1 26 10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theNa	me of City Agency, Department, Committee or	
Name: KICHAN	comment, or to speak for or against a proposa	al on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:  Address:  Street  Business phone: 323 - 474	XINGTON #109 C City MY	A. CAZ 90029 - SELF Zip
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Client Name:		Phone #:
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Date 1	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
1/26/2010	DECORUM WILL BE ENFORCED.	
I wish to speak before the	C⊙UNCÌ ne of City Agency, Department, Committee or C	Council
Do you wish to provide general public	comment, or to speak for or against a proposal	on the agenda? ( ) For proposal ( ) Against proposal
Name: Larry Jacko	owitz	( ) General comments
Business or Organization Affiliation:		
Address:Street	City	State Zip
	Representing:	·
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
Client Name:_		 Phone #:
Client Address:Street	City	State Zip

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

CITY OF LOS ANGELES SPEAKER	CARD
Date THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Name of City Agency, Department, Committee or C	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:  Address: Lottle 7 Lexing City  Business phone: 323/334-5262 Representing:	State SO38
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
Client Name:	Phone #:
Client Address: Street City	State Zip
NOTE: THIS IS A PUBLIC DOCUMENT.  CITY OF LOS ANGELES SPEAKER	
THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
wish to speak before the City Agency, Department, Committee or C	Council
Name: Poble Hodge	
Business or Organization Affiliation:	
Address:StreetCity	State Zip
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Client Name:	Phone #:
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date / 26/10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.  Zhem#2 CF08-0923	
I wish to speak before the	Las Angeles (ity Council Name of City Agency, Department, Committee or	Council	
Do you wish to provide general posterior Stephe	public comment, or to speak for or against a proposa	Against proposal	
Business or Organization Affiliat	ion:		
Address: 9975 Whea	Hand Avenue Sunland	CA 91040 State Zip	
Business phone:	Representing: 4/	'	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:	
Client Name:		Phone #:	
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Date 1 26 2010	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 p	oublic comment, or to speak for or against a proposa	Against proposal	
Business or Organization Affiliation:			
Address: 1918 N Ma	W \$202 LA CA	90031	
Business phone: 323 500	City  9524 Representing:	State Zip	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		Phone #:	
Client Address: Street	City	State Zip	

Date 1/26/10	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 or	Council
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	l on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliati	on: Americans for Safe Acc	ess
Address: DISTUCT	on: Americans for Safe According Los Angeles	CA 90026
Business phone: 373\376	6347 Representing:	State Zip
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	CITY OF LOS ANGELES SPEAKER	CARD
Date 1/2-11 10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date 0/-26-/0	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $2 08 - 0928$		
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 proposa $BERRV$	on the agenda? ( ) For proposal ( ) Against proposal General comments		
Business or Organization Affiliati	ion: Attorney	**		
Address: 338K M	Changelon Ave., LA,	CA 90066		
Business phone: (3/0)//	S.341/ Representing: Stewart Rich	Win haw Offices		
	PAID SPEAKER AND PROVIDE CLIENT INFOR			
Client Name: Law O	thices of Stewarth	1ch/17 Phone #: 964		
Client Address: Street	Conducing Park East He	600, LA 90064 State Zip		
Please see reverse of card for	or important information and submit this entire card to	o the presiding officer or chairperson.		
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CITY OF LOS ANGELES SPEAKER CARD				
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Business or Organization Affiliation	on:			
Address: )) 24 W (6	3rd St 45 gardena	A 90247		
Business phone: 310 291	- *	Olale Mp		
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date 1-26-10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item,	or Case No.
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Do you wish to provide general posts of the Name:	She FHC	l on the agenda? ( ) For pro ( ) Agains ( ) Genera	posal et proposal al comments
Business or Organization Affiliat	ion:	***************************************	
Address: 1143 b	fta HerAS	State Zip	
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Client Name:		Phone #:	
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Date 1 Ve 1 t	CITY OF LOS ANGELES SPEAKER  THE CITY COUNCIL'S RULES OF	CARD  Council File No., Agenda Item,	or Case No.
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Date 1/26/09	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	Douncil		
Do you wish to provide general	public comment, or to speak for or against a proposa			
Name: DAVID	Lizama		ainst proposal eneral comments	
Business or Organization Affiliat	ion:			
Address:Street	City	State Zip		
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wish to speak before the	Name of City Agency, Department, Committee or C	ouncil		
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Business or Organization Affiliati	on:		·	
Address:Street	City	State Zip		
	Representing:	Otato Elp		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFORI	MATION BELOW:		
Client Name:		Phone #: _		
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date

# THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

I wish to speak before the					
-	Name of City Agency	, Department, Co	mmittee or Council		
Do you wish to provide ger	neral public comment, or to sp		st a proposal on the agenda?		
Name: MA4	& DOW.			( ) Against ( ) General	comments
Business or Organization A	Affiliation:				
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Business phone:	Representir	ng:			
CHECK HERE IF YOU A	RE A PAID SPEAKER ANI	D PROVIDE CLII	ENT INFORMATION BELOV	N:	
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Street		City	State	Zip	

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