

Council File No. Agenda Hom. or Case No.

12/16/09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Occincil the No., Agenda Rent, of Case No.
I wish to speak before the	CITY	COUNCIL	
	Name of City Agency, De		or Council
Do you wish to provide general Name: Don Dov	public comment, or to spea	k for or against a propo	osal on the agenda? () For proposal () Against proposal () General comments

Business phone: 323-326-634 Representing:

Date

Address:

Business or Organization Affiliation: <u>HMENICANS</u> FOI SCIFE HCCESS

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: Phone #:

Client Address: City State Zip

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

Date 12/16/09	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 on	Council
Do you wish to provide general	public comment, or to speak for or against a propos OW. EASTMAN	al on the agenda? () For proposal
Rusiness or Organization Affiliat	ion:	Third Control of the
Address: Street Street Address: 923-474-5	LEXINGTON AVE #109 City 1602 Representing: My	State Zip 70027
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Client Name:		Phone #:
Client Address: Street	City	State Zip

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

Date

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Council File No. Agenda Item or Case No.

Date

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Address:		: City	State	Zip	
		Representing:			
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Client Address:	Street	City	State	Zip	

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I wish to speak before the	Name of City Agency, Department, Commi	ttee or Council	
Do you wish to provide general p	public comment, or to speak for or against a p	proposal on the agenda?	? () For proposal () Against proposal (→ General comments
Business or Organization Affiliati	on:		
Address: 4804 Lanc	1 Cm Valley Vly	CH State	97607
Business phone:	Representing:		
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Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date 16 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	ee or Council
Do you wish to provide general pul	blic comment, or to speak for or against a p	roposal on the agenda? (_) For proposal
Name: HOMAS	XXIICH1	() Against proposal () General comments
Business or Organization Affiliation	n:	
Address: 1856 R	SALBOA BLVD GO	CANADA HILLS State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A I	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

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

Date

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I wish to speak before theName	of City Agency, Department, Committee	or Council
Do you wish to provide general public co	mment, or to speak for or against a prop	
Name: Michael	Levitt	() Against proposal General comments
Business or Organization Affiliation:		
Address: 21014 CAN Business phone: 818-625-3	STARIA ST CANOS	A Park CH 91304
Business phone: 818-625-3	Representing:	State Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 12-16-9	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No. MAR.MANA
I wish to speak before the $__$	Name of City Agency, Department, Committee or	7	14
Do you wish to provide general	public comment, or to speak for or against a propos	al on the agenda?	
Name:			Against proposal General comments
	tion:		
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Date 12/16/2009	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.			
I wish to speak before the	CITY COUNCII 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	l on the agend	a? () For proposal () Against proposal			
Name: TARER 7			() General comments			
Business or Organization Affiliat	ion: NANKAL AID PHARMACU	1				
Address: 736 LINCO	ion: NANKAL ALD PHAKMACY ZN VENICE City	CA	90291			
Business phone: 310 701-	9520 Representing: <u>GOVRMET CIRCL</u>	State N <i>ROOM</i>	'P			
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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I wish to speak	before the		
. Mon to open		Name of City Agency, Department, Committee	ee or Council
Name:		public comment, or to speak for or against a pro-	oposal on the agenda? () For proposal () Against proposal () General comments
Addrage:			
, ladi 033	Street	City	State Zip
		Representing:	
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Client Name:_	· · · · · · · · · · · · · · · · · · ·		Phone #:
Client Address	:		
	Street	City	State Zip

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Date 2/16/09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	0., Agenda Item, or Case No.
I wish to speak before the <u>Las</u>	Angules City (ounci) Name of City Agency, Department, Committee	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: Mikey Olive	• • • • • • • • • • • • • • • • • • • •	-	Against proposal () General comments
Business or Organization Affiliati	ion:		
Address: Street	Ford Studio City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF		<u>L</u>
Client Name:			Phone #:
Client Address:	City	State	Zip
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Date /2/16/09	THE CITY COUNCIL'S DECORUM WILL BE EI	RULES OF NFORCED.	Council File No., I	Agenda Item, or Case No.
I wish to speak before the	Angules City Council Name of City Agency, Departm	nent, Committee or (Douncil	
Do you wish to provide general provide Parick Wilm	oublic comment, or to speak for c			() For proposal () Against proposal () General comments
Business or Organization Affiliat		.,,,,		
Address: 235/ Moun f	- Olympus Drive Las	Angeles	CA State	90046
Business phone:	· · · · · · · · · · · · · · · · · · ·	H	State	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVI	DE CLIENT INFOR	MATION BELOV	v:
Client Name:		VVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVV	Ph	one #:
Client Address:Street	City		State	Zip

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I WISH to speak before the	TY DOVNOIL of City Agency, Department, Comm	ittee or Council	
Do you wish to provide general public com Name: LENY (15) Business or Organization Affiliation: 1	15/	(For proposal) Against proposal) General comments
Address:Street Business phone: 5/4-823-31/3	City Representing:	State	Zip
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Client Name:		Pho	ne #:
Client Address:	City	State	Zip

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Date /2//6	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCEI		o., Agenda Item, or Case No.
I wish to speak before the	City Cou	Mcil	
I	Name of City Agency, Department, Com	mittee or Council	
Do you wish to provide general pub.	olic comment or to speak for or against	a proposal on the agenda	(C) For proposal (C) Against proposal (D) General comments
Business or Organization Affiliation	: holly wood	hishlands.	
Address:Street	6218 YUCG 5	+'	
	City Representing:	State	Zip
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIE	NT INFORMATION BELO	ow:
Client Name:			Phone #:
Client Address:	City	State	Zip

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

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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	e or Council
Do you wish to provide general p	public comment, or to speak for or against a pro	posal on the agenda? () For proposal
Name: Wary	1 Ajchele	() Against proposal () General comments
Business or Organization Affiliati	ion:	^
Address:	40 King slands	State 90066
Business phone:	Representing: MUSOF	- State 2.p
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
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Date 12-16-09	THE CITY COUNCIL'S DECORUM WILL BE I		Council File No.,	Agenda Item, or Case No.		
I wish to speak before the City Council						
	Name of City Agency, Depart	ment, Committee or	Council			
Do you wish to provide general posterior Name:	·	or against a proposa	al on the agenda?	() For proposal () Against proposal (X) General comments		
Business or Organization Affiliat		ie Rese	arch			
Address: 4623 2				90041		
Business phone: 323-25	• • • • • • • • • • • • • • • • • • • •	•				
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Client Name:			Pł	none #:		
Client Address: Street	City		State	Zip		

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Date 12-16-09	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, Commi	ittee or Council			
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal					
Name: VANL	CLines	() Against proposal () General comments			
Business or Organization Affiliati	Λ ⁻ '\	ATTIVE CAREGIVERS			
	INCOLD Blyd FOH Ve	uice OA 90291 State Zip			
Business phone: 877 21		•			
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Client Name:		Phone #:			
Client Address:Street	City	State Zip			

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Date 12/16/09	Date	ate /	Z /	16	105	9			
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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File	No., Agenda	Item,	or Case	No.
	14			

I wish to speak befo	ore the	CITY	COUNCIL		
	Na	me of City Age	ency, Department, Comm	ittee or Council	
Do you wish to pro	vide general public	comment, or	to speak for or against a	proposal on the agenda?	
Name:	BARRY	K,	RAMER ESIDENT		() Against proposal() General comments
Business or Organi	zation Affiliation:		ES IDENT		
Address:					
	Street		City	State	Zip
Business phone: _		Repres	enting:	····	
CHECK HERE IF	YOU ARE A PAI	D SPEAKER	AND PROVIDE CLIENT	INFORMATION BELOV	v:
Client Name:		·		Ph	ione #:
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12-16-09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	enda Item, or Case No.
I wish to speak before the	Coly Cource		
	Name of City Agency, Department, Committee or	Council	
	public comment, or to speak for or against a proposa	l on the agenda? () For proposal) Against proposal
Name: Heroup	SACHS	() General comments
Business or Organization Affiliat	ion:		
Address:Street			
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Business phone:	Representing:		
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Client Name:		Phoi	ne #:
Client Address:			
Street	City	State	Zip

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Date 12-16-2009	THE CITY COUNCIL'S F		Council File No., /	Agenda Item, or Case No.
I wish to speak before the $P40$	UM comite	ie		
Do you wish to provide general pu	Name of City Agency, Departm blic comment, or to speak for o			() For proposal
Name: Alla Che	RNOV			() Against proposal (X) General comments
Business or Organization Affiliation Address: 727/Z N.	1: Natural K	<u>'emedies</u>	, Luc.	
Address: 927/z N.	Western ave	_,LA	State	90029 Zip
Business phone: $(323)87$	' 9500 Representing:			
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Client Address:Street	City		State	Zip

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Date 12 (16/09	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	Agenda Item, or Case No.
I wish to speak before the	Hy Cyrncul Name of City Agency, Department, Committee or	Council	
Name: SARAM	oublic comment, or to speak for or against a proposa	ıl on the agenda	Against proposal () General comments
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Client Address:Street	City	State	Zip

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Date 1.	THE CITY COUNCIL'S RULES OF	Council File No., A	genda Item, or Case No.
12/16/09	DECORUM WILL BE ENFORCED.	ITEM	14
I wish to speak before the	TONY DROUSSARD		
	Name of City Agency, Department, Committee	ee or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a pro	oposal on the agenda?	For proposal) Against proposal
Name:		() General comments
-	ion:		
Address:Street	City	Ctoto	710
		State	Zip
Business phone:	Representing:		
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Client Address:			
Street	City	State	Zip

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I wish to speak before the	Council					
	Name of City Agency, Department, Committ	ee or Council				
	ublic comment, or to speak for or against a pr	() Against proposal				
Name:		() General comments				
Business or Organization Affiliatio	n:					
Address:	/A					
Business phone:	City Representing:	State Zip				
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	nment or to speak for or against a proposa	on the agenda? () For proposal) Against proposal
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Business or Organization Affiliation:			
Address: Street			
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Business phone:	Representing:		
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Client Name:		Phone	e #:
Client Address:Street	City	State	Zip

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Date 2/16/09		UNCIL'S RULES OF LL BE ENFORCED.	Council File	No., Agenda Item, or Case No.			
	Angulo City Iame of City Agency	<i>J (ounci)</i> 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: Debra Styphe	AS			✓ Against proposal() General comments			
Business or Organization Affiliation:							
Address: 9975 Wheatlan	nd Avenue	Sunland	State	9/048 Zin			
Business phone:		- ()		_\			
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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