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SPEAK, RELOAD ONL	
o., Agenda Item, or Case No.	
a? (For proposal () Against proposal () General comments	
Zip	

Date Council File N THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. 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 proposal on the agenda Business or Organization Affiliation: Address: City State Business phone: _____ Representing: _____ CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: _____ Phone #: ____ Client Address: _____

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

State

City

L2/7/46			Council File No., Agenda Item, or Case No.
	Name of City Agency, I		
Do you wish to provide g	eneral public comment, or to spe	ak for or against a prop	osal on the agenda? (For proposal
	12000		() Against proposal
Business or Organization	Affiliation: NRDC	~	
Address:			
Stree	t	City	State
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CHECK HERE IF YOU	ARE A PAID SPEAKER AND	PROVIDE CLIENT INF	FORMATION BELOW:
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Date 7 Dec 246	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	- 0
Do you wish to provide general pu	blic comment, or to speak for or against a propo	osal on the agenda? (For proposal
Name:	CAR ZA	() Against proposal () General comments
Business or Organization Affiliation		A
	S- hin sl- #3	20 [A- 8:013 State Zip
Business phone:	Representing:	
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 /2/7 /6	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Countil 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 pu	ublic comment, or to speak for or against a prop	oosal on the agenda? For pro	posal
Name:	ZON KRACOV		st proposal al comments
Business or Organization Affiliation	n:		
Address:Street			
Street	City	State Zip	
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name: UNIUERSA	2 WASTE SYSTE	M S Phone #:	
Client Address: 2460 Street		CA 900	158
Street	City	State , Zip	

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Date 12/7/16	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORC		le No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Co		MM.
Do you wish to provide general p	public comment, or to speak for or again	st a proposal on the age	
Name: GIL VA	QUEZ.		Against proposal () General comments
Business or Organization Affiliation	on: LATIND CHAR	IKER OF	COMMERCE
Address: 6 0 WE	ST, 6TH ST, CA 9-9094 City Representing:	State	. 900/4
Business phone: 213 62	Representing:		
	PAID SPEAKER AND PROVIDE CL		
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 12/07/2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. SPECIAL MEETING
I wish to speak before the	Rame of City Agency, Department, Committee or	#1-3 Council
	public comment, or to speak for or against a propos	() Against proposal
Name: Im	CLARKE	General comments
Business or Organization Affiliati	on: Apt ASSN OF GREATER	LA.
Address: <u>621</u> Street	3. WESTMORECAND AVE.	State Zip
Business phone: 213-384	-4/3/ Representing: AAGLA	
	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name: PR	ICE 15 TOO HIGH	Phone #:
Client Address:Street	City	State Zip

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Date 12 7 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 1 7-l ro Was
I wish to speak before theNai	€6 € me of City Agency, Department, Committee of	or Council
	comment, or to speak for or against a propo	osal on the agenda? For proposal Against proposal
Name: Joseph	ARROYO	() General comments
Business or Organization Affiliation:	NA Los Angel	25
Street Business phone:	City Representing:	State Zip
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date // - 7 -/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	Burea o Danitah	-Council
	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	eal on the agenda? (1) For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Container Managema	ent Group, UC
Address: July Street	minta St. Van Nins	91402 State Zip
Business phone: 949. 289	10305 Representing: Container	management Group
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

Date		Council File No	., Agenda Item, or Case No.
1217/16			1_
Wish to speak before the	of City Agency, Department, Com		Comnitted
Do you wish to provide general public com	ment, or to speak for or against	a proposal on the agenda	? For proposal () Against proposal
Name: Ron Hex	rera		() General comments
Business or Organization Affiliation:	teamsters L	-ocal 3	96
Address:			
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CHECK HERE IF YOU ARE A PAID SI	PEAKER AND PROVIDE CLIE	NT INFORMATION BEL	ow:
Client Name:		F	Phone #:
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Date 6	2016	THE CITY COUNCIL'S DECORUM WILL BE		1	o., Agenda Item, or Case No. 97-5, 10-1797-5
I wish to speak I	before the	Name of City Agency, Depart		Council	
Do you wish to p	provide general p	ublic comment, or to speak for	or against a proposa	I on the agenda	? () For proposal
Name:		JAME J.	Poffer		() Against proposal (X) General comments
Business or Org	janization Affiliatio	on: Titam DISDOS	591, LLC		
Address:	P.O. B	× 73505 U	A	CA	90073
Business phone	(800) E	H 936 Representing:		State	Zip
		PAID SPEAKER AND PROV	IDE CLIENT INFOR	RMATION BEL	ow:
Client Name:				F	Phone #:
Client Address:					
	Street	City		State	Zip

CITY OF LOS ANGELES SPEAKER CARD
Date Dec 7, 2016 Council File No., Agenda Item, or Case No. No. 7-Franchise
I wish to speak before the Ft Comp Hell 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: 1+3-55 W. Olygles Parks WANATT, Phelps
Address: 11355 W. Olympic Blud. CA City State Zip
Business phone: Representing:
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:
Client Name: Athens Serves Phone #:
Client Address: 17303 Montague St PACOEMA CASTREE Zip

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Date 2/2/16	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	100
Do you wish to provide general po	ublic comment, or to speak for or against a proposa	al on the agenda	? (V) For proposal
Name: CYNTMA	Lozano-Vant Ho	11	() Against proposal () General comments -
Business or Organization Affiliation	on: Mar post ECD CONS	WITING	
Address: 400 N LUS	Robles #6 PasAdena	CA	9110/
Business phone: 909 560	054 Representing: Self	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip
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Date 12 17/16	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	- Committee
	ublic comment, or to speak for or against a propos	al on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Clements Givirome	()
Address: 15230 E	Burbank Blid #103 Los Ang	State Zip
Business phone: 310-925	609 Representing: Clement	Environmente)
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

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Date 12/7/16	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, Committ	ee or Council
	eral public comment, or to speak for or against a property of the second	() Against proposal
Name:	1	
Business or Organization Al	ffiliation:	Servies
Address:		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU AI	RE A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date [2/7/18	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Item	Agenda Item, or Case No.
wish to speak before the	E + E comulti-		
Name: SUSann	el public comment, or to speak for or against a project Passantino ation: Republic Seation		Against proposal General comments
Address:Street	City	State	Zip
	Representing:		Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:		Ph	none #:
Client Address:Street	City	State	Zip

Date:		Council Fil	e No., Age	nda Item, or	Case No.
12-7-16		, ten	I	Zero	WOTF
I wish to speak before the:		11011		•	
	me of City Agency, Depart	tment, Committe d	or Council	_	
Do you wish to provide general public comment, or to spea	k for or against a propo	osal on the age	nda?	For prop	osal
Name: Greg Loughause (2) Business or Organization Affiliation: Athens	Seaver'S	Pronovac	ad [proposal comments
		_			
Address: 12303 Months of Please Print Legibly: Street	Aco MA	State	4	Zip	
Business phone:Representing:					
CHECK HERE IF YOU ARE A PAID SPEAKER AND F	ROVIDE CLIENT INFO	DRMATION BE	LOW:		
Client Name:			Phone #	;	
Client Address:					
	ty	State		Zip	
Please see reverse of card for important information an	d submit this entire car	rd to the presidi	ng office	r or chairp	person.

Date:		Council File No., Agenda Item, or Case No.		
12/7/16		I Ham	1 / Bero waste	
I wish to speak before the: Energy + Er	ruironment (omm.		
	Name of City Agency, Departm	ent, Committe or Cour	ncil	
Do you wish to provide general public comment, or to spe	eak for or against a proposi	al on the agenda?	For proposal	
Name: Dessica Aldridge			☐ Against proposal☐ General comments	
Business or Organization Affiliation:	Services			
Address: 12303 Montague St Please Print Legibly: Street	205 Angele	s CA		
Please Print Legibly: Street	City	State	Zip	
Business phone: Representing:	Athens Sen	vices		
CHECK HERE IF YOU ARE A PAID SPEAKER AND	PROVIDE CLIENT INFOR	MATION BELOW:		
Client Name:		Phone	e #:	
Client Address:Street				
Street	City	State	Zip	
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Council File No. Agenda Item or Case No.

Date

12/7/16	Franchise System
I wish to speak before the Environment Name of City Agency, Department, Committee	Committee ee or Council
Do you wish to provide general public comment, or to speak for or against a pro-	oposal on the agenda? () For proposal
Name: Kabira Stokes	() Against proposal() General comments
Business or Organization Affiliation: Isidore Electronic.	s Recycling
Address: 1769 Naud St. LA	CA 90012
Address: 1769 Would St. LA Street City Business phone: 323-222-3322 Representing: Myself	State Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT	NFORMATION BELOW:
Client Name:	Phone #:
Client Address: City	State Zip

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Date 12/07/2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		o., Agenda Item, or Case No.
I wish to speak before theN	E+E Committee Name of City Agency, Department, Committee or	Council	
Do you wish to provide general pub	lic comment, or to speak for or against a propos	al on the agenda	a? () For proposal
Name: ELIZABETH	HAWLEY		() Against proposal () General comments
Business or Organization Affiliation:	VICA		
	erman #170 LA	State	91406 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

Date

Client Name:

IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY EPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. I wish to speak before the E and E committee Hearing 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? K For proposal Against proposal General comments Business or Organization Affiliation: Zero waste Address: 22755 Brandywine Dr. calabase Street

Business phone: 818-825-2140 Representing: Kiss the Grands

Phone #:

Client Address: City State

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

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i47 //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 o	901 00.000
Do you wish to provide general	public comment, or to speak for or against a proposi-	sal on the agenda? (>) For proposal () Against proposal
Name: JESSE N	MARQUEL	() General comments
Business or Organization Affiliat	ion: Coshitis to A SAFE EN	vironment
Address: 601 W G	JilHbODY Bre Wilmide	(State Zip
Business phone: 320-590-	City City Representing: ENUI PUNHOUTH	- Justia conounito
	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:	City	Ctata 7in
20,661	City	State Zip

Date:	1		_	Council File No.	, Agenda Item, or Case No.
12 7	16			item	1 ZeroWAS
I wish to speak bef	ore the:		Committee		
Do you wish to pro	vide general publi		ume of City Agency, Department k for or against a proposal (
Name:	DUND	CAJA			☐ General comments
Business or Organ	zation Affiliation:	Regional	Hispanic	. Char	Against proposal General comments NOCOMMEN
Address:	1	_	C	A	
Please Print Legibly:	Street	9	ity	State	Zip
Business phone: _		Representing: _			
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Client Name:				Pho	ne #:
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Please see rev	erse of card for in	nportant information an	d submit this entire card to	the presiding o	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	Environmental Comm		
	Name of City Agency, Department, Committee or		
	ublic comment, or to speak for or against a propos	al on the agenda?	? (For proposal
Name: You	SALDAWA		() Against proposal () General comments
Business or Organization Affiliation	on: LA COUNTY DISPO	SAL A	5500
Address: 5753-6-	Santu Qua Cyn Rde	CA State	92807
Business phone: 7/4-693	Representing: LACDA		
	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		P	hone #:
Client Address:	City	State	Zip