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Date 11/1/1/12	THE CITY COUNCIL'S RULES OF	Council File No.	., Agenda Item, or Case No.		
11/18/11/2	DECORUM WILL BE ENFORCED.	#14			
I wish to speak before the	los Angeles City (cunci)	10-1	1797		
	Name of City Agency, Department, Committee or C	Council	<i>,</i> , ,		
	oublic comment, or to speak for or against a proposa	I on the agenda'	() Against proposal		
Name: Kayla Campos			() General comments		
ا Business or Organization Affiliati	on: Whate Wavker				
Address:Street	Los Angeles City	<u> </u>			
	• •	State	Zip		
Business phone: <u>\$\&-9\3- 15</u>	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		P	hone #:		
Client Address:					
Street	City	State	Zip		

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Date 114 112	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO		e No., Agenda Item, or Case No. 1 니
I wish to speak before the	Los Angeles City (cunci) Name of City Agency, Department,	Committee or Council	
Name: Greg Good	oublic comment, or to speak for or ag		nda? (※ For proposal () Against proposal () General comments
Business or Organization Affiliati	on: Director of Don't Whate	LA campaign	
Address: 464 Lucas five	Suite 202 Los Arreje	eles CA State	90017 Zip
Business phone: 213-477-	Representing:		po
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORMATION B	ELOW:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 14 112		OUNCIL'S RULES OF		, Agenda Item, or Case No.
11/18/12	DECORUM	WILL BE ENFORCED.	#14	
I wish to speak before the\oS				
	Name of City Ager	cy, Department, Committe	e or Council	
Do you wish to provide general p		speak for or against a pro	posal on the agenda	() Against proposal
Name: <u>Mavia Elena T</u>	201970			() General comments
Business or Organization Affiliation	on: LA County	Federation of Lab	01	
Address: 2130 James Street	M Wood Blud	Los Angeles City	<u>C P</u> State	9 0006 Zip
Business phone: <u>213 - 7 36 -</u>		•		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:			P	hone #:
Client Address:				
Street		City	State	Zip

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

Date	THE CITY COUN	CIL'S RULES OF	Council File No	., Agenda Item, or Case No.
11/18/12	DECORUM WILL	BE ENFORCED.	# 14	
I wish to speak before theರ	s Argetes City (W Name of City Agency, D	സ ് \ epartment, Committee	or Council	
Do you wish to provide general p	oublic comment, or to spea	k for or against a prop	osal on the agenda	? (Ⅺ For proposal
Name: Lon Hevrera				() Against proposal () General comments
Business or Organization Affiliati	on: <u>Teamstevs</u>			
Address: <u>\$80 664 Pav</u> Street	V 2d. Saite 200	City NA.	CA State	91724 Zip
Business phone: <u>&&&- 915</u> -	-5636 Representing:		•	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND F	PROVIDE CLIENT IN	FORMATION BELO	ow:
Client Name:			P	hone #:
Client Address:				
Street		City	State	Zip

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Date 14	THE CIT	Y COUNCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
11/18/12	DECOR	JM WILL BE ENFORCED.	#	IU
			VI	1
I wish to speak before the	Los Angeles	City (aunci)		
	Name of City A	gency, Department, Committe	ee or Council	
Do you wish to provide general p	oublic comment, c	or to speak for or against a pro	oposal on the agenda	a? () For proposal () Against proposal () General comments
Name: <u>Alex Salqudo</u>	***************************************		***************************************	- () General comments
Business or Organization Affiliati	on: <u>Waste</u>	Worker		
Address: 12924 S. Mor	na Blvd	Compton	CA.	90222
Business phone: 323 - 212		•	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKE	R AND PROVIDE CLIENT I	NFORMATION BEL	ow:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip

NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE. YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK, EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

		-	
Date	THE CITY COUNCIL'S RULES	OF Council File	No., Agenda Item, or Case No.
11/14/12	DECORUM WILL BE ENFORCE	D. #	14
		<u> </u>	
I wish to speak before the	Name of City Agency, Department, Cor	nmittee or Council	,
	public comment, or to speak for or agains		da? (X For proposal () Against proposal () General comments
Name: Many Manager	Legic Vankeuren Campbell		() dellerar comments
Business or Organization Affiliati	on: Squ	are One Postawant	General Manager
Address: 4854 Fuxita	n the los Arigeles	LA State	90029 Zip
Business phone: 323-632-	9633 Representing:	***************************************	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

10-1797

State

Zip

Date // /14 /12	THE CITY COUN DECORUM WILL		Council File No.,	Agenda Item, or Case No.
I wish to speak before the	City Co		ee or Council	
Do you wish to provide general Name:	public comment, or to spea	ık for or against a pro	oposal on the agenda?	For proposal () Against proposal () General comments
Name: <u>Larry</u> Business or Organization Affiliat				
Address: 5/9 Shatto	o P/	<u>A</u>	State	90020 Zip
Business phone: 2/3-352-			State	Zιμ
CHECK HERE IF YOU ARE	A PAID SPEAKER AND I	PROVIDE CLIENT I	NFORMATION BELO	W:
Client Name:			Pl	none #:
Client Address:				

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

City

Street

NOTE: THIS IS A PUBLIC DOCUMENT.

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

Date	THE CITY COUNCIL'S RULES OF	Council File N	lo., Agenda Item, or Case No.
11-14-12	DECORUM WILL BE ENFORCED.		orto
I wish to speak before the	Name of City Agency, Department, Committee or		
<u></u>	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general Name: Simboa Rusiness or Organization Affiliati	public comment, or to speak for or against a propose Wrightion: SETU 721	al on the agend	a? () For proposal () Against proposal () General comments
Dusiness of Organization / timati			***************************************
Address:Street	City	State	Zip
	Representing:		,
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	.ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip
			·
Please see reverse of card f	or important information and submit this entire card	to the presiding	officer or chairperson.

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Date)1-14-12	THE CITY COUNCIL'S DECORUM WILL BE	· · · · · · · · · · · · · · · · · · ·	Council File No., A	Agenda Item, or Case No.
I wish to speak before the	CITY COI	INCIL		
	Name of City Agency, Depar	tment, Committee or (Council	
Do you wish to provide general p	_	r or against a proposa	I on the agenda?	(X) For proposal () Against proposal
Name: MIKE O	'GARA			() General comments
Business or Organization Affiliati	A 1	ARCA NEIBH	borhood Cou	ingL
Address: 930 CAYU	GA AVE SUN	Valley	CA	91352
Business phone: \$18-767			State ARSA	NG
CHECK HERE IF YOU ARE A		, ,	RMATION BELOW	y:
Client Name:			Pho	one #:
Client Address:	City	······································	State	Zip

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Date /	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
11/14/12	DECORUM WILL BE ENFORCED.	IF 14 SOLID WASTE FRANCHISE
I wish to speak before the	COUNCIL	
Nam	ne of City Agency, Department, Committee or	Council
Do you wish to provide general public of	comment, or to speak for or against a propos	al on the agenda? () For proposal
Name: KOBERT SPURG	k)	() Against proposal () General comments
Business or Organization Affiliation:	HEARTH GARE WITHOUT	HARM
Address: 41 OAKVIG) TERRACE BOSTA	MA 02130
Business phone: 94-677-676	PD Representing: HEAUH CARE	Without Hard
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	THE CITY COUNCIL'S RULES OF	Council File No., Ag	jenda Item, or Case No.
11/14/12	DECORUM WILL BE ENFORCED.		
		,	
I wish to speak before the			
	Name of City Agency, Department, Committee o	r Council	
Do you wish to provide general pul	blic comment, or to speak for or against a propos	sal on the agenda? () For proposal
Name: CHUCK B	1642		Against proposal General comments
Name:			,
Business or Organization Affiliation	: AAGLA		
Address: 4334 Ma	MMOTHER CITY	non of Kr	21423
Street	City	State	Zip
Business phone: \$15-996	- <u> </u>		
ONEON REDE IE VOILADE VI	PAID SPEAKER AND PROVIDE CLIENT INFO	ODMATION RELOW	
CHECK HERE IF 100 ARE A I	AID SPEAKEN AND PROVIDE CEIENT INTO	JINIMITON DELOW.	· L
Client Name:		Phor	ne #:
011 1 4 1 1 2 2 2			
Client Address:Street	City	State	Zip

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Date 1112	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	CITY COUNCIL	
·	Name of City Agency, Department, Committ	ee or Council
Do you wish to provide general p	public comment, or to speak for or against a p	roposal on the agenda? () For proposal
Name: WAYDE	= HUNTER	() Against proposal () Seneral comments
Business or Organization Affiliati	ion: NORTH VALLEY COALT	ONOF CONCERNED CITIZENS
Address: 1\862 B	PALBOA BLUD BOX172G	Against proposal Seneral comments ONOF CONCERNED CITIZENS RAHADIA HUS 9 1344 State Zip
Street	' City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zin

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Date) (THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
1 11/12/12/1	DECORUM WILL BE ENFORCED.	10-	1797
I wish to speak before the	COUNCIL		Trosh
	ne of City Agency, Department, Committee or	Council	District!
Do you wish to provide general public of	comment, or to speak for or against a proposi	al on the agenda?	() For proposal
Name: MA Thew MI	ller		Against proposal () General comments
Business or Organization Affiliation:	7 1 V		
Address: 771 West	- Oliver St SAA	> Pell	0 9073h
Address: 77/ West Business phone: 3/2 470 807	City Representing:	State	Zip
,	SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	w:
Client Name:		PI	hone #;
Client Address:			
Street Street	City	State	Zip
			and the second s

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]			
Date	THE CITY COUNCIL	'S RULES OF	Council File No.,	Agenda Item, or Case No.
	DECORUM WILL BE	ENFORCED.		
		50s		
I wish to speak before the	TRASH THOLE	JUS		
•	Name of City Agency, Depa	rtment, Committee or C	Council	
Do you wish to provide general p	oublic comment, or to speak fo	or or against a proposal	on the agenda?	() For proposal
Name: JEAN	NOU YE		***************************************	(✗) Against proposal() General comments
Business or Organization Affiliati	on: AAG LT	+		
Address: 2118 WIL	shire BL	5- M	Cu	
Street Business phone: 31,559,20	Ci Representing:	MUSOL	State	Zip
Business phone: 110 3 10-0	nepresenting:	mysey		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PRO	VIDE CLIENT INFOR	MATION BELOV	V:
Client Name:			Ph	one #:
Client Address:				
Street	Ci	y .	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 Committee of	r Council	
Do you wish to provide general p	Name of City Agency, Department, Committee of Dau U . *S		nda? For proposal () Against proposal () General comments
Business or Organization Affiliation	on: ZATSE		
Address: 25 20 Ce.	Olive Burbank	Cq State	9/40/
	50702 Representing: エタフS 左		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 11-14-2011	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	·
Name: HAROLD	oublic comment, or to speak for or against a propos		a?()For p roposal (<i>L</i>) Against proposal ()General comments
Business or Organization Affiliati		111	-9118
Address: Street Business phone: 323 73	295 (Representing: ACA	State	Zip
	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	.ow:
Client Name:		***************************************	Phone #:
Client Address:Street	City	State	Zip

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	•		
	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	, Agenda Item, or Case No.
I wish to speak before the AC	ity concil		
Name	of Gity Agency, Department, Committee or	Council	
Do you wish to provide general public con	mment, or to speak for or against a proposa	l on the agenda	?()For proposal ()Against proposal ()General comments
Business or Organization Affiliation:	A County Business F	ederatio	7
Address: Street Street	neld tes Amelies	State	900/Z
Business phone: (213) 376-3	Representing:		·
·	SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELO	ow:
Client Name:		P	hone #:
Client Address: Street	City	State	Zip

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Date 11/14/12	THE CITY COUNCIL		Council File N	No., Agenda Item, or Case No.
I wish to speak before theNa	City (OU) ame of Gity Agency, Depa	nCr / urtment, Committee or C	ouncil	
Do you wish to provide general public Ron Bowdo	c comment, or to speak for Row			la? () For proposal () Against proposal () General comments
Business or Organization Affiliation:			cts CA	1100 90031
Business phone: (877) 787	30/Representing:	ity	State	Zip
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PRO	OVIDE CLIENT INFORI	MATION BEI	_OW:
Client Name:				Phone #:
Client Address:Street	C	ity	State	Zip

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Date 1/////>	THE CITY COUNCIL'S RULES OF	Council File No	., Agenda Item, or Case No.			
11/19/10	DECORUM WILL BE ENFORCED.	Hem	14			
I wish to speak before the	A City Council					
	Name of City Agency, Department, Committee or	Council				
Do you wish to provide general po	ublic comment, or to speak for or against a proposa	l on the agenda	? () For proposal () Against proposal () General comments			
Business or Organization Affiliatio	Business or Organization Affiliation: A Pastmbt Asa, of Greetler LA					
Address: 675.	restmorted to Aggles	State	<u> J</u>			
Business phone: (2/3) 389	Representing:	Oldre	· · · · · · · · · · · · · · · · · · ·			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELO	ow:			
Client Name:		F	Phone #:			
Client Address:Street	City	State	Zip			
Please see reverse of card fo	r important information and submit this entire card t	to the presiding	officer or chairperson.			

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Date \ / / /	THE CITY COUNCIL OF DISTRICT	Council File No	., Agenda Item, or Case No.
1/14/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	item	
I wish to speak before the	A 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 propos	al on the agenda	? () For proposal () Against proposal
Name: <u>BEVE514</u>	Leworthy		() General comments
Business or Organization Affiliat	ion: California Apertmet	ASSn	4A
Address: 320 N.	laschmont Las Angele	r Ca	90004
Business phone: (323)46	6-345Representing:	State	Zip
•		DREATION DEL	3344
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	HWAIION BELL	744: L
Client Name:		F	Phone #:
Client Address:	Olh.	Otata	71
Street	City for important information and submit this entire card	State	Zip

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Date 11/14/17	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
	oublic comment, or to speak for or against a propos	al on the agenda? () For proposal
Name: ///CLSTUM Business or Organization Affiliati	COX on: Building awners & Mo	() General comments
Address: 706 5. F	1000 105 Angles 1000 105 Angles 1000 105 Angles 1000 105 Angles	State Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

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Date / / //	THE CITY COUNCIL'S RULES OF	Council File I	No., Agenda Item, or Case No.		
11/14/12	DECORUM WILL BE ENFORCED.	iten	n. 14		
	7	710	V & 1		
I wish to speak before the	A City Cancil				
	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	I on the agend	() Against proposal		
Name: Val	(dru)		() General comments		
Business or Organization Affiliation: Valley, Industry & Comnered Asso.					
Address: 5121 Van	News Ste 23 Sherman Och	5,Q	9.463		
Business phone: (88) 8/7	Representing:	v State	Zip		
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 11/14/12	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	A City Carcil		
Do you wish to provide general	Name of Gity Agency, Department, Committee or opposed public comment, or to speak for or against a proposed		;? () For-proposal
Name: A SCHOOL	Ane Williams		(V) Against proposal () General comments
Business or Organization Affiliati	ion: Chtral City 1550,		
Address: 676 VI	Shire Blid. Los Angeles	State	Zip
Business phone: (213) 63	24-2425 Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address: Street	City	State	Zip

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Date 1/14/17	THE CITY COUNCIL'S RULES OF	•	, Agenda Item, or Case No.
11/1/10	DECORUM WILL BE ENFORCED.	1 item 1	
I wish to speak before the	7 City Council		
	Name 6f-City Agency, Department, Committee of	r Council	
-	blic comment, or to speak for or against a propo	sal on the agenda?	() For proposal () Against proposal
Name: Gretche Le	WOJSKY		() General comments
Business or Organization Affiliation			
Address: 10201 VI	Pico Los Angeles	CA	•
Street	City Representing:	State	Zip
	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	w:
Client Name:		Pl	hone #:
Client Address:			
Street	City	State	Zip