1/27/2012	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	ECAE	1947; # 10
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 ag	가 불편 (고향원) 가득 맞을 것	
Name: Douglas Hi	lewan		(*) Against proposal (*) General comments
Business or Organization Affiliation			
Address: 13630 C	reve St. Valley	GIEN CA State	91405
Business phone: 818-416 (•
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BE	LOW:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

Date						1
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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 b	efore the	LOS ANGE Name of City Agency,	したら Departmer	nt, Committee or Cou	ncil .		
Name:	JACOB	ublic comment, or to sp AALES on: TREEF				() Against propo	osal
Address:	COL MI	OLHOLLAMD	DR .	PENERTA	State	$\frac{3}{7}$ in	<u>52 L</u> e
	4 4	<u>५८८ ५</u> Representin				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
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Client Address:_	Street		City		State	Zip	

Date (2) - (2)	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		Agenda Item, or Case No.
I wish to speak before the	Cana		
	Name of City Agency, Department, Com	mittee or Council	
Do you wish to provide general p	public comment, or to speak for or against	a proposal on the agenda?	() For proposal () Against proposal () General comments
Business or Organization Affiliat	ion:		
Address:	Lange		
Address:Street	City	State	Zip
Business phone:	Representing:		
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Client Name:		Pł	none #:
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.

Date 1-27-12	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	ر S OF	9 No., Agenda Item, or Case No.
I wish to speak before the	City Can	h.C.	
	me of City Agency, Department,	Committee or Council	
Do you wish to provide general public Name:	comment, or to speak for or aga	inst a proposal on the ager	nda? (※) For proposal () Against proposal () General comments
Business or Organization Affiliation:	and the state of t	n Contrator	5 Association
The state of the s	CALL ALL. DOWY	,	90240
Business phone: <u>562.861-0</u>	929 Representing:	nyinesity Contra	Hos Association
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE C	LIENT INFORMATION BE	ELOW:
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.

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	puncil
Do you wish to provide general public comment, or to speak for or against a proposal of	n the agenda? (1) For proposal
Name: Susie Santilena	() Against proposal () General comments
Business or Organization Affiliation: Heal the Bay : Green	14
Address: 1444 919 Street Santa Monica Street City	CA 20401
Business phone: (810)451-1500 Representing: 110/1 11/2 Bay	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORM	[]
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 / / 2 / 1 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
Lwich to speak hafare the	
Name of City Agency, Department, Commit	ttee or Council
Do you wish to provide general public comment, or to speak for or against a p	oroposal on the agenda? (>>/> For proposal () Against proposal () General comments
Business or Organization Affiliation: 18EW Local 11	
Address: 297 V Marengo Ave Pranten	
Business phone (626) 9+3 9 73 2 Representing: Electrical	1 5
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION 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.

1 / / / 🕻	ITY COUNCIL'S RULES OF RUM WILL BE ENFORCED.	Council File No., Ag	enda Item, or Case No.
	Agency, Department, Commit	ttee or Council	
Do you wish to provide general public comment, Name:			For proposal) Against proposal) General comments
Business or Organization Affiliation: <u>LP/OC</u> Address: <u>IDZG</u> Beverzy BC			
Street Business phone: 213 4f3-4222 Rep	· ·	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAK	ER AND PROVIDE CLIENT	INFORMATION BELOW:	
Client Name:		Phor	ne #:
Client Address:Street	City	_ State	Zip

Date / - 27 - / 2	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Cetra Council		
	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general Name:	I public comment, or to speak for or against a prop		For proposal Against proposal General comments
Business or Organization Affilia		a Nh	
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INF		V:
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.

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the LP.C. +y Courc.C. 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 Name:	i i i i i i i i i i i i i i i i i i i	X) For proposal Against proposal General comments
Business or Organization Affiliation: 1. V.O. E. Local 501		
Address: 1561 W. 131 ST. Los Ingels Con 9 Street	State State	Zip
Business phone: 213-385-1561 Representing: 1.U.S.E. Local 50		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW	
Client Name:	Pho	ne #:
Client Address: City	State	Zip

		84. J. B. H. H. B.			
Date 1/27/2	THE CITY COUNCIL'S REDECORUM WILL BE EN	ULES OF	cil File No., Age	onda Item, or Co	ase No.
wish to speak before the	COUNCIL				
wish to speak before the	Name of City Agency, Departme	ent, Committee or Council			
Do you wish to provide general p	public comment, or to speak for or	against a proposal on the	agenda? (>) For proposa	al
Name:	Arseneault) Against pro) General co	
Business or Organization Affiliati	on: Volley Inc	dustry & Comm.	erce As	SOC.	
Address: 5121 V	AN NUYS BLVD. Sui	te 203 Los An	igales, CA	91605	
Street	City	<u></u>	áte	Zip	
Business phone:〈ダバジ〉分	<u> </u>				
	PAID SPEAKER AND PROVID	E CLIENT INFORMATIO	N BELOW:	-	
Client Name:			Phon	e #:	
Client Address:				\$	
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JAN 2012	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCE		No.
I wish to speak before the	DAVID BS	ARRON	
	Name of City Agency, Department, Com	nmittee or Council	
	public comment, or to speak for or against	() Against propos	
Name:		() General comm	ients
Business or Organization Affilia	tion		
Address:	and the second s	ent to the country and for the country and the	
Street	City	State Zip	***************************************
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIE	NT INFORMATION BELOW:	
Client Name:		Phone #:	
Client Address: Street	City	State Zip	
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TY COUNCIL'S RULES OF RUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.				
I wish to speak before the	Hu Council					
Name of City	Agendy, Department, Committee or	Council				
Do you wish to provide general public comment,		I on the agenda? () For proposal				
Name: Agenda item 1	Sewer Rate Se	/ // C // General comments				
		stration Foundate				
Address: 1 LM U Drive North	to Hall Los Avele	s CA 90045				
Business phone: 310-216-9804Rep	presenting: Surfa Marica Ro	State, Zip Foundation				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION 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.

Date THE CITY COUNC DECORUM WILL E		Council F	ile No., Agen	da Item, or Case No.
I wish to speak before the		or Council		
Do you wish to provide general public comment, or to speak				
Name: Samuel Organization Affiliation: Region of			(_)	Against proposal General comments
Business or Organization Affiliation: Realon of	Water C	July July	Contra	o-P
Address: 329 W. 4/th La Street Business phone: 213 5 3 6 - 6605 Representing:	S Angeles	, CA		Zip
Business phone: (2/3) 576-6605 Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PR			ſ	. ,
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.

Van Nuys

Date/Time Submitted 01/27/2012 11:11 AM Council File No., Agenda Item, or Case No.

I wish to speak before the	Council				
	Name of City Age				
Do you wish to provide general public of Name:	omment, or to speak for <i>Wayne Katersk</i>	() For proposal () Against proposal () General comment			
Business or Organization Affiliation:					
Address:					
Street		City	State	Zîp	
Business phone:	Representing:		-		
CHECK HERE IF YOU ARE A PAID SP	EAKER AND PROVIDE	CLIENT INFORM	IATION BELOW:		
Client Name:		P	hone No.:		
Client Address:	·				
Street		City	State	Zip	

Van Nuys

Zip

State

Council File No., Agenda Item, or Case No. Date/Time Submitted 01/27/2012 11:13 AM Council 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?) For proposal Against proposal Herbert Thompson Name: General comments Business or Organization Affiliation: Address: City Street State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone No.: Client Address: Street