Date 5-/7-//	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
	e of City Agency, Department, Committee		to the
Do you wish to provide general public o	comment, or to speak for or against a pro	posal on the agenda?	(S) For proposal
Name: Mark Gel	(d)		Against proposal     General comments
Business or Organization Affiliation:	Heal the Bay		
Address: 1444 9th		ie Ct	90401
Street  Business phone: 310-451-15	Representing:	State Le 13cy	Zip 
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW	<i>f</i> :
Client Name:		Pho	one #:
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 Mg 17	THE CITY COUNCIL'S DECORUM WILL BE	A to diver almost office. After A	Council File No.	Agenda Item, or Case No.
I wish to speak before the	nevyy + Environmas Name of City Agency, Depar	Committee or (	Council	· · · · · · · · · · · · · · · · · · ·
Do you wish to provide general p				? ( ) For proposal
Name: LEWIS MACAE	· .	or agamer a proposal	on mo agonaa	Against proposal     General comments
Business or Organization Affiliati	**************************************	River		
Address: 570 W. Au			State	90065
Business phone: 323-225		**************************************	State	ZIP
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:			F	'hone #:
Client Address: Street	City	1	State	Zip

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Date / /	THE CITY COUNCIL'S RULES		Council File No., Agenda Item, or Case No.			
5/17/204	DECQRUM WILL BE ENFOR	10 10	7 ()			
I wish to speak before the	EDE Committee					
	Name of City Agency, Department, (	Committee or Council				
	public comment, or to speak for or aga	nst a proposal on the agend	a? ( ) For proposal ( ) Against proposal			
Name: DASON SCHMID			(X) General comments			
Business or Organization Affiliat	ion: TREEFEOPLE					
Address: 1760 Mulha	Und Dr. Beverly Hills	CA	90210			
Business phone: 3/0-623-4	Mand Dr. Bevely Hills  1784 Representing: True Pe	aple	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 95-17-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
wish to speak before the Nam	e of City Agency, Department, Committee or C	onneil Connittee	
Do you wish to provide general public o	comment, or to speak for or against a proposal	I on the agenda? ( $ ight>$ ) For proposal	
Name: Sam Urger		( ) Against proposal ( ) General comments	
Business or Organization Affiliation:	alforming Regional Wa	to Quality Board	
Address: 320 W. 4th		7 0 0 1 3 State Zip	
	Representing: Above	•	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		Phone #:	
Client Address:Street	City	State Zip	
	,	r	

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

Date 5/17/11	20 St # 20009	OUNCIL'S RULE	1000- 1000- 11	Council File N	o., Agenda Item, or Case No.
I wish to speak before the	reregy + Env	nonnent	Committ		
	Name of City Ager	ncy, Department,	Committee or C	ouncii	
Do you wish to provide general		speak for or aga	inst a proposal	on the agenda	a? ( ) For proposal ( ) Against proposal
Name: Sephanie	Taylor	***************************************	R <sub>1</sub>		( ) General comments
Business or Organization Affiliat	ion: Green La	4 Coalitha	w'		
Address: 1500 W Clark	veda st	Los Angel	28	<u>C</u>	960 1 2 Zip
		,		State	∠ıp
Business phone: 213 346	<u> ろ 2 5 9</u> Represe	nting:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:				***************************************	Phone #:
Client Address:					
Street		City		State	Zip

 $\underline{ \textit{Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.} \\$ 

Date  5/17/ 2011  THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.		
I wish to speak before the A CATY Council Committee or	Council		
Do you wish to provide general public comment, or to speak for or against a proposa	tl on the agenda? (X) For proposal ( ) Against proposal		
Name: atiwa C vaus	( ) General comments		
Business or Organization Affiliation: Jan Au Moroca Ba	yneeper		
Address: 120 Croadway Sunta Planica	CA 98401		
Business phone: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		

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