Date 3 / 1 / 11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	1,0
I wish to speak before the	City Council	
	Name of City Agency, Department, Comr	nittee or Council
Do you wish to provide general po	ublic comment, or to speak for or against a	proposal on the agenda? (💢) For proposal
Name: Bicycle	Master Plan	(*/) Against proposal ( ) General comments
Business or Organization Affiliation	Master Plan on: Los Angeles Equine Adu	isony Pommittee
Address: 9655 Wart	wath St Sunland	CH 31040
Street Business phone: 8/8/5/14	wath St Sunland City  A E	State Zip
	PAID SPEAKER AND PROVIDE CLIEN	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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

Date	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	ES OF	ile No., Agenda Item, or Case No.
	Name of City Agency, Department,	Committee or Council	NO MAN BIKES ON
Do you wish to provide general	public comment, or to speak for or ag	ainst a proposal on the age	enda? 🌇 For proposal
Name: Chillea Sa	Tman		( ) Against proposal ( ) General comments
Business or Organization Affiliat	ion:		
<del>-</del>	choney Dr. Senlan	State	91540 Zip
Business phone:	U C	iell	·
,	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION E	BELOW:
Client Name:		<del></del>	Phone #:
Client Address:	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.

Data	}	
Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
03/01/11	DECORUM WILL BE ENFORCED.	tem 8/9/19
	•	
I wish to speak before the	Council	
	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	
Name: JuhiA	TARNAWSKE	( ) Against proposal ( ) General comments
Business or Organization Affiliat	ion: resident of Shac	dow Hills
Address: 9737 L	WHEATLAND AVENUE S.	UNLAND Ca. 91040
Business phone: 818 35	2-2145 Representing: Holse (	Community RE. Riding TRAIN
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 3/1/11	THE CITY COUNC		Council File N	o., Agenda Item, or Case No.
	DEOO! IO!!! WILL			
I wish to speak before the	t City Conv	reil		
Nar	ne of City Agency, De	epartment, Committee o	or Council	
Do you wish to provide general public	comment, or to spea	k for or against a propo	sal on the agenda	a? 🚫 For proposal
Name: Nina Elias	oph			( ) Against proposal     ( ) General comments
Business or Organization Affiliation:				
Address: 4008 140/14	Knoll Drne	Los Angola	A) CA	90027
Business phone: <u>323</u> 333 <u>5</u>		Oity .	Sidle	Διμ
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND P	ROVIDE CLIENT INFO	DRMATION BEL	ow:
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 3 -1-17		Y COUNCIL'S RULES OF JM WILL BE ENFORCED		cil File No., A	genda Item, or Case No.
I wish to speak before the	ACIR	2 Comes?			
	Name of City A	gency, Department, Comr	nittee or Council		
Do you wish to provide general	public comment, c	or to speak for or against a	proposal on the	agenda?	For proposal     Against proposal     General comments
Business or Organization Affiliat	tion: <u> </u>	Ino my ()			
Address: ZZ U 1 E	51 5%.	Vomen	CA		90058
Address: Street Business phone: 33 581-6	1293 Repr	City esenting: のいらんいさら	St.	ate	Zip
CHECK HERE IF YOU ARE				N BELOW	<b>/:</b>
Client Name:				Pho	one #:
Client Address:					
Street		City	St	ate	Zip

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

	CITY ( LOS AN	IGELES SPEA	KER (	RD		
Date 20[[		NCIL'S RULES OF BE ENFORCED.	C	ouncil File N	No., Agenda Item, or Case No.	
I wish to speak before the	LA CITY	COUNCI	<u> </u>	- 1		
en a	Name of City Agency, I	Jepartment, Commit	ttee or Coun	CII		
Do you wish to provide genera	al public comment, or to spe	ak for or against a p	roposal on t	he agenc	da? For proposal	
Name: MBRY L	DUISE ECK	In AV			Against proposal General comments	
Business or Organization Affili			Equ		ComMITTEL	ige.
	HILL DALE	SIMIVA	LEJ C	112-	27063	
Business phone:	S754 Representing	City	<i>«</i>	State	Zip	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND	PROVIDE CLIENT	INFORMAT	ION BEI	LOW:	
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.

NOTE: THIS IS A PUBLIC DOCUMENT.

Date 3 - 1 - 1	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	
	ramo of only Agonoy, Department, Committee	o or oburion	
Do you wish to provide general ı	public comment, or to speak for or against a prop	posal on the agenda	
Name: <u>levelia</u>	Nagers		( ) Against proposal ( ) General comments
Business or Organization Affiliat	ion: Sate Mails		
Address: 423 S.V	Lomer Burbank		91506
Street	City	State	Zip
Business phone: 31043	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELC	ow:
Client Name:		F	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		Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, De	partment, Committee or	Council
Do you wish to provide general p	oublic comment, or to speak	for or against a proposa	al on the agenda? ( ) For proposal
Name: <u>Bay baya</u>	Jarvik		( ) Against proposal ( ) General comments
Business or Organization Affiliat	ion:		Cerna Filet 10-2385-Si
Address: 146 5 A	ven St,	1	item #10
Business phone:	Representing:	St St don's	Who USE Elygian Pan
CHECK HERE IF YOU ARE	A PAID SPEAKER AND P	ROVIDE CLIENT INFOR	RMATION 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.

### CITY ( LOS ANGELES SPEAKER C 3D

Date 3-[- []	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 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 proposa	I on the agenda					
	Name: Marian Dodge () Against proposal () General comments						
Business or Organization Affiliat	ion: Los Feliz Improvem	ent A	55N.				
Address:Street	City	State	Žip				
Business phone:	Representing:						
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 3 1 11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	10
I wish to speak before the	Name of City Agency, Department, Com	
Do you wish to provide general	public comment, or to speak for or against	a proposal on the agenda? ( ) For proposal
Name: (ARO	L SRUSHA	( ) Against proposal  ( ) General comments
Business or Organization Affiliat	ion:	
Address: ) + O O (	reveland,	Cleration of 91202
Business phone: \$18-34	17-7710Representing: SCIF	· · · · · · · · · · · · · · · · · · ·
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	T 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 3-1-//	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, Comm				
	public comment, or to speak for or against a	proposal on the agenda? ( ) For proposal ( ) Against proposal			
Name: AL MC	<u> </u>	General comments			
Business or Organization Affiliat	ion: <u>Sierra Club</u>				
Address: $1812W$	Silver Lake Dr	LA CA 96026			
Business phone: 323-661	Representing:	Citito Zip			
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 3/1/11	THE CITY COUNCIL'S RU DECORUM WILL BE ENF	//		o., Agenda Item, or Case No. - 23 25 - 52
I wish to speak before the	Name of City Agency, Departmen	nt, Committee or Co	ouncil	
Do you wish to provide general	public comment, or to speak for or a	gainst a proposal d	on the agenda	
Name: <u>Sallie W</u>	· Neubauer			<ul><li>( ) Against proposal</li><li>( ) ✓ General comments</li></ul>
	ion: Citizens Comm	ittee to	Sewe	Ehislan Park
Address: 1561 Cev	ro Gordo Loc city	, Angeles	State	90026
Business phone: 323 (ale (	,	<u> </u>		
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/Time Submitted

#### Van Nuys

Council File No., Agenda Item, or Case No. 03/01/2011 12:58 PM 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 Rick Knightingale Name: General comments Business or Organization Affiliation: Address: City 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 State Zip

Date/Time Submitted

#### Van Nuys

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

03/01/2011 01:06 PM 10 I wish to speak before the \_\_\_\_\_ Council 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 Name: \_\_\_\_\_\_ Donna Pearman General comments Business or Organization Affiliation: Address: State Zip Business phone: \_\_\_\_\_\_ Representing: \_\_\_\_\_\_ CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone No.: Client Address: City State Zip

Date 3/1/11	THE CITY COUNCIL'S DECORUM WILL BE		Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Angules City Con	Múl	Council	
Do you wish to provide general pu	ıblic comment, or to speak fo	r or against a proposal		(X) For proposal  ( ) Against proposal ( ) General comments
Business or Organization Affiliatio	n: LACBC			
Address: 634 S. Spe	ing 8t LA	<del>\</del>	CA	90026 Zip
Business phone: 213.629.2		•	Sidie	Ζιμ
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PRO	VIDE CLIENT INFOR	MATION BELOV	v: [
Client Name:			Ph	none #:
Client Address:Street	Ci	tv	State	Zip
	-	•		

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

3-1-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Cyty Co uncy Name of City Agency, Department, Committee	or Council	
Do you wish to provide general	public comment, or to speak for or against a propo	osal on the agenda?	
Name: Gleh	n Bailey		( ) Against proposal ( ) General comments
Business or Organization Affiliat	ion: LA City Bryde	Advisory	Committee
A 10		416	
Business phone: Street	19/72 Encho 19/2 3-34 Representing nail Glem	Bally SF	Zip Zip Qahoo, ion
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	w:
Client Name:		Pl	hone #:
Client Address:Street	City	State	Zip

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

Date 3/1/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No.
wish to speak before the	City Council		
Na	me of City Agency, Department, Committe	e or Council	
Do you wish to provide general public	comment, or to speak for or against a pro	pposal on the agenda?	(X) For proposal  ( ) Against proposal  ( ) General comments
Business or Organization Affiliation: _	LACBC		
Address: 634 8 Sprz	ing 84 LA	CA	90026
Street  Business phone: 213.629.214		State	Zip
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW	V:
Client Name:		Ph	one #:
Client Address:			
Street	City	State	Zip

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

	OIII LOS AIGELLA	) OF LAILL HE	,	
Date 3-1-1 #	THE CITY COUNCIL'S RU DECORUM WILL BE ENF	ILES OF	cil File No., Agenda Item	, or Case No.
wish to speak before the	Name of City/Agency, Departmen			
Do you wish to provide general	public comment, or to speak for or a	against a proposal on the		
Name: Glenn	Bailey			st proposal ral comments
Business or Organization Affiliat	tion: LA City	Brey de Ad	Msony Col	nnittee
Address:				
Business phone:	3 3407 Representing w	Glan Baile	y SFV ey	alvo, con
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE	E CLIENT INFORMATIO	N BELOW:	
Client Name:			Phone #:	
Client Address:				
Street	City	Sta	ate Zip	

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CITY

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

MARCH 1 2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		385 $ \pm$ 2
I wish to speak before the	ITY COUNCIL  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		a? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliati	ion:		
Address: 2024 VA	LENTING ST, L,A.	CA State	900 D16 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BEL	ow:
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.

3-1-1/	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORC	OF I	385-32
I wish to speak before the	AA City Counce Name of City Agency, Department, Co	2 ommittee or Council	
Do you wish to provide general p	public comment, or to speak for or again	st a proposal on the agenda	
Name: VIKKI	BRINK		<ul><li>Against proposal</li><li>General comments</li></ul>
Business or Organization Affiliat	ion: Foothist Trail W	istrict Neighorbo	A Council
Address:Street	Staday / Stl		
Business phone: Street	City	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CL	IENT INFORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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

Date 3 - 1 - 11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ager	nda Item, or Case No.
I wish to speak before theNar	me of City Agency, Department, Committee or	Council	5 <i>7</i>
Do you wish to provide general public	comment, or to speak for or against a proposa	al on the agenda? (	
Name: CHRIST	INF PETERS		) Against proposal General comments
Business or Organization Affiliation:	Christis Com	n to8	me
Address: ELYSIA	1 PARK		
Business phone:	City Representing:	State	Zip
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:	
Client Name:		Phone	e #:
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.

Pate MARCH	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, Committee	10 - 2385 - 52 ee or Council
Do you wish to provide general p	public comment, or to speak for or against a pro	oposal on the agenda? ( ) For proposal ( ) Against proposal ( ×) General comments
Business or Organization Affiliat	ion: Friends of Griffith 7	Park
Address: 2624 Green	Oak PI LA	CA 90068
Business phone:	Representing: Friends of	Griffith Park
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION 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 March 1, 2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No. Agenda Item, or Case No.  #10 = 23 85 - 5/-  Les on Juking: horse trails
I wish to speak before the	e of City Agency, Department, Committee or	
Do you wish to provide general public c	omment, or to speak for or against a proposa	al on the agenda? ( ) For proposal
Name: Sail Wilk		( ) Against proposal ( ) General comments
Business or Organization Affiliation:	participant en equi	e activities
Address: 10941 Walnut	Dr Shadow Hills	CA 91040
Home Street 918 352 45	City 518 Representing: Suparating	breycles and horses
	SPEAKER AND PROVIDE CLIENT INFO	·
Client Name:		Phone #:
Client Address:Street	City	Ctata 7in
Street	City	State Zip

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

Date 03/01/2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theNam	y CONCIL e of City Agency, Department, Committee or G	Council
Do you wish to provide general public of Name: Name:	comment, or to speak for or against a proposa	on the agenda? ( ) For proposal ( Against proposal ( ) General comments
Business or Organization Affiliation:  Address: MGIT (LAYINES)	ST. RESEDA, CA	. 91335
Business phone: 33 219 33	Representing: SELF & M	EIGHRORS Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOF	MATION 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.

# Van Nuys

Date/Time Submitted 03/01/2011 12:58 PM		Cour	ncil File No., Agenda Item, <b>10</b>	or Case No.
I wish to speak before the		Council		
•	Name of City Ago	ency, Department, Com	mittee or Council	
Do you wish to provide gene Name:	eral public comment, or to speak for <i>Rick Knightinga</i>	<del>-</del>	sal on the agenda?	( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Af	filiation:			
Address:				
Street		City	State	Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE	CLIENT INFORM	ATION BELOW:	
Client Name:		Ph	one No.:	
Client Address:				× 4000000
	Street	City	State	Zip

# Van Nuys

Date/Time Submitted 03/01/2011 12:57 PM		Council Fi	Council File No., Agenda Item, or Case No.		
I wish to speak before the		Council			
	Name of City Agency,	Department, Committee	e or Council		
	ublic comment, or to speak for or a <i>Rick Knightingale</i>	gainst a proposal c	on the agenda?	( ) For proposal ( ) Against proposa ( ) General comme	
Business or Organization Affiliation	on:				
Address:					
Street		City	State	Zip	
Business phone:	Representing:				
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLI	ENT INFORMATIO	ON BELOW:		
Client Name:		Phone	No.:		
Client Address:		City	State	Zip	

Date 2	THE CITY COUNCIL'S RULES OF	Council File No	., Agenda Item, or Case No.
9/1/2011	DECORUM WILL BE ENFORCED.	1	
1			
I wish to speak before the	City Council		
	Name of City Agency, Department, Comm	nittee or Council	
Do you wish to provide general	oublic comment, or to speak for or against a	proposal on the agenda	? ( ) For proposal ( ) Against proposal
Name: My JATE	R		( ) General comments
Business or Organization Affiliat	ion: L.A. BreyCLE A	Hisory Lé	MMITTER
Address: Bevery	Gen Bus L.A.	I CA	?
Business phone: 310-415-	-6888 Representing:	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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

3/1/2011	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE	110 124	- 52			
I wish to speak before the	Name of City Agency, Department, C	DVNCIL ommittee or Council				
	public comment, or to speak for or again					
Name: STEVE	MESSER	(	) Against proposal ) General comments			
Business or Organization Affiliation: CONCERNED OFF-ROAD BICYCLISTS ASSN						
Address: P.O. Box 5	7576, SHORMAN C	ALS CA 914	-13			
	Representing:		ΣΙΡ			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:		Phone	e #:			
Client Address: Street	City	State	Zip			

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

3-1-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	مر ا	o., Agenda Item, or Case No.			
I wish to speak before the	A. C. ty Council  Name of City Agency, Department, Committee or C	Council				
Do you wish to provide general p	public comment, or to speak for or against a proposa	I on the agend				
Name: Mark Lang	ton		( ) Against proposal     ( ) General comments			
Business or Organization Affiliation: Concerned Off Road Bicyclists Associ						
Address:	Shermon Oaks	CA	710			
Business phone: 5555	S-16 Representing: COKBA	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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NOTE: THIS IS A PUBLIC DOCUMENT.

Date	1		Council File No.	Agondo Itam or Coso No
3/1/11	THE CITY COUNC DECORUM WILL		Council File No.,	Agenda Item, or Case No.  HIO MKB PM
I wish to speak before the	Name of City Agency, Do	PLL epartment, Committee or Co	puncil	
Do you wish to provide general p	public comment, or to spea	k for or against a proposal o	on the agenda?	For proposal
Name: JIM SHA	MAN			( ) Against proposal     ( ) General comments
Business or Organization Affiliat	ion:			
Address: 1954 PA	TOM DRIVE	COLVER CITY	State	90270 Zip
Business phone: 30 204	4946 Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND F	PROVIDE CLIENT INFORM	IATION BELO	w:
Client Name:			P	hone #:
Client Address:Street		City	State	Zip

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

Date	THE CITY COUNCIL DECORUM WILL B	and the part of the same of th	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	COUNCIL Name of City Agency, Dep	artment, Committee or Co	ouncil	
Do you wish to provide general possing a fill of the contraction of th	man			(※) For proposal  ( ) Against proposal ( ) General comments
Business or Organization Affiliat  Address: 11254 Street  Business phone: 31020	atom Drive	Culver CIty	State	90230 Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PR	OVIDE CLIENT INFORM	MATION BELO	w:
Client Name: Client Address: Street		City	State	none #:

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

Date 3 -/ -//	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	or Council			
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda?			
Name: Seff	Jacobberger		<ul><li>( ) Against proposal</li><li>( ) General comments</li></ul>		
Name: Seff Jacobberger () Against proposal () General comments  Business or Organization Affiliation: Brycle Advisory Committee					
Address:	·				
Street	City	State	Zip		
Business phone:	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Ph	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.

Data

3-1-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		385-52			
I wish to speak before the	City Council					
	Name of City Agency, Department, Committee or C	ouncil				
Do you wish to provide general p	public comment, or to speak for or against a proposal	on the ager				
Name: CHARLOTT	E BRODIE		( ) Against proposal     ( ) General comments			
Business or Organization Affiliation: ETI (EQUESTRIAN TRAILS, INC) CORRAL 54						
Address: 15043 TUBB ST MISSION HIUS CA 9/345 Street City State Zip						
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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Date 3 1 - 1 1	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Caty Council  Name of City Agency, Department, Commit	ittee or Council
Do you wish to provide general p	oublic comment, or to speak for or against a p	
Name: Glen	n Balley	(∠) Against proposal ( ) General comments
Business or Organization Affiliati	ion: LA CHY Brayou	le Advisory Comments
Address:	/	<i>'</i>
Business phone: 818 453	3-3407 Email City lens B.	alley SFV @ yaroo on
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
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Street	City	State Zip

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

Date

I wish to speak before the LA aty council	
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  ( ) Against proposal  ( ) General comment.	
Business or Organization Affiliation: Los Angeles County Porcycle Coalition	
Address: 634 S. Spizing UA CA 900Z6 Street City State Zip	
Business phone: 213 629 2)47 Representing:	
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 3 / 1 / 20 / 1	THE CITY COUNDECORUM WILI			Council File No	., Agenda Item, or Case No.
I wish to speak before theN	lame of City Agency, I	<u> </u>		Council	
Do you wish to provide general publ		Α.		on the agenda	? For proposal  ( ) Against proposal  ( ) General comments
Business or Organization Affiliation:	SIERR	A	CLUB		
Address: 12551 P				C ∱ State	90060
Business phone:					
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Client Address:Street		City		State	Zip

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Date 1	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
Do you wish to provide general	public comment, or to speak for or against a proposa	
Name: Welowie	Cata	( ) Against proposal ( ) General comments
Business or Organization Affiliat	ion: Equipe to viscon	OMM! (150
Address: Street	recre It Sylver	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELOW:
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Client Address:	City	State Zip
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MARCH 1, 2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		B WE PLAW)
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a prop	osal on the ager	
Name: KENT ST	TRUMPELL		( ) Against proposal     ( ) General comments
Business or Organization Affiliat	ion: L69 ANGELES BA	- <u>C</u>	
Address: 6483 NA	tucy St, Los Angbles	State	90045
Business phone: 310-215-	OU4_ Representing: SELF		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BI	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 3 - ('-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	nda Item, or Case No.		
wish to speak before the	Name of City Agency, Department, Commit	tee or Council			
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	a Harrington	(	) General comments		
Business or Organization Affiliat	ion: Calitrai for 5	afe Trail	)		
Address:	St7 A Sizon 310	Brighton A	ve LACA90018		
Street Business phone: \$1894	City	State	Zip		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Phon	e #:		
Client Address:Street	City	State	Zip		

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IVai	me of only Agency, Department, Committee	or obtained		
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? (X) For proposal				
•		<b>3</b>	(*) Against proposal	
Name: Lynn	1010m		( ) General comments	
Business or Organization Affiliation:	Coalition for Saf	è Trails		
	Sierra Bruta City	2A (	D 90046	
Street Street Business phone: 323-876-	City	State	Zip	
Business priorie.	——————————————————————————————————————			
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Date 3 \ 2011	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	ES OF	il File No., Agenda Item, or Case No.		
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Business or Organization Affiliation:					
Address: <u>3706 N. Fi</u> Street	gueroa St. Los Angles,	CA Stat	90065 te Zip		
Business phone:	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
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Council File No., Agenda Item, or Case No.

Date

3/1/2011	DECORUM WILL BE ENFORCED.	井	ID	
I wish to speak before the	LA City Counci)			
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Do you wish to provide general	public comment, or to speak for or against a propo-		(X) For proposal ( ) Against proposal	
Name: Hex	Mongson		( ) General comments	
Name: Business or Organization Affiliation: Bi kes in the agenda (M) For proposal (D) Against proposal (D) Against proposal (D) Against proposal (D) General comments				
Address:Street				
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