

# CITY OF LOS ANGELES SPEAKER CARD

Date 4/18/11

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No. 1

I wish to speak before the Ad Hoc Committee  
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

Name: William Delvac

Business or Organization Affiliation: Armbruster Goldsmith Delvac LLP

Address: 11611 San Vicente <sup>#900</sup> Los Angeles CA 90049  
Street City State Zip

Business phone: 310 254-9050 Representing: AEG

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

Client Name: AEG Phone #: 310 213 742-7115

Client Address: \_\_\_\_\_  
Street City State Zip

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Date 4/18/11

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No. 1

I wish to speak before the AD HOC COMMITTEE ON THE PROPOSED DOWNTOWN STADIUM  
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

Name: GARY L. COOK

Business or Organization Affiliation: UA PLUMBERS LOCAL UNION 78

Address: 1111 W. JAMES M. WOOD BLVD., LOS ANGELES CA 90015  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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

1

I wish to speak before the

Ad Hoc Committee

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

(x) General comments

Name:

Ted Fikre

Business or Organization Affiliation:

AEG

Address:

800 W. Olympic Blvd, LA CA 90015

Street

City

State

Zip

Business phone:

213-742-7115

Representing:

AEG

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

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Phone #:

Client Address:

Street

City

State

Zip

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

1

I wish to speak before the

AD HOC COMMITTEE FOR STADIUM

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

Name:

Ron Miller

Business or Organization Affiliation:

LA IOL BUILDING + CONSTRUCTION TRADES COUNCIL

Address:

1626 Beverly

Street

Los Angeles

City

CA

State

90024

Zip

Business phone:

213 453-4222

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

4-18-11

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

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

1

I wish to speak before the L.A. City Ad Hoc Committee  
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: Kevin Bass  General comments

Business or Organization Affiliation: Painters & Allied Trades

Address: \_\_\_\_\_  
Street City State Zip

Business phone: 626-316-2424 Representing: \_\_\_\_\_

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Client Address: \_\_\_\_\_  
Street City State Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date 4/18/11

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No.  
1

I wish to speak before the LA City Ad Hoc Committee  
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

Name: Shomari Davis

Business or Organization Affiliation: IBEW 11

Address: 297 N. Marengo Ave Pasadena Ca 91101  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Client Address: \_\_\_\_\_  
Street City State Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date

4/18/2011

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

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

1

I wish to speak before the

Committee Item

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

Name:

William Raleigh

Business or Organization Affiliation:

I.A.T.S.E LOCAL 33

Address:

1720 W. MAGNOLIA BLVD, BURBANK CA. 91342

Street

City

State

Zip

Business phone:

818-606-8495

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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# CITY OF LOS ANGELES SPEAKER CARD

Date

4-18-11

THE CITY COUNCIL'S RULES OF  
DECORUM WILL BE ENFORCED.

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

11-0023

1

I wish to speak before the Committee  
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

Name: Rachel Torres

Business or Organization Affiliation: Unite Here Local 11

Address: 464 S. Lucas Ave, Suite 201 LA CA 90017  
Street City State Zip

Business phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Client Address: \_\_\_\_\_  
Street City State Zip

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# CITY OF LOS ANGELES SPEAKER CARD

Date 4/18/11

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

Council File No., Agenda Item, or Case No. 11-0023 (1)

I wish to speak before the COMMITTEE  
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  
(x) General comments

Name: NATE HOLDEN

Business or Organization Affiliation: \_\_\_\_\_

Address: 3411 S. COCHRAN AVE LA CA 90016  
Street City State Zip

Business phone: 313/4461729 Representing: Self

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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