Date 3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.
I wish to speak before the	ITY Court		
Nam	e of City Agency, Department, Committee or	Council	
Do you wish to provide general public of	comment, or to speak for or against a proposa	al on the agenda	
Name:	of Moute	1R	() Against proposal () General comments
Business or Organization Affiliation:	Sea Hasheen		
Address: Street			
		State	Zip
busiless phone:	Representing:		
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	rmation 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 chairnerson

NOTE: THIS IS A PILE! IN TOTAL

Date 3/8/()	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	y Council	. 0		
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		
Name: Aprella Coiqsby () Against proposal () General comments Business or Organization Affiliation: Watts Community Peyelogneat Advisory				
Business or Organization Affiliation: L	latte Community Done	Convert	Advison	
Address:	· •	Com	nittep	
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	Zip	
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Please see reverse of card for important information and submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding officer or all a submit this entire card to the presiding of the submit this entire card to the presiding of the submit this entire card to the submit this entire card to the presiding of the submit this entire card to the submit this entire car

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Date 03/08/11	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	SOF	ile No., Agenda Item, or Case No.	
I wish to speak before theNam	e of City Agency, Department, o			
Do you wish to provide general public c				
Name:	Dr Cle	LA3ZNC	Against proposal () General comments	
Business or Organization Affiliation:	/	LA3ZNC		
Address: Street			LA 90032-171	
Street Business phone:	City Representing:	Brd Mbr	· Zip	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
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 4-8-1(THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE	OF	o., Agenda Item, or Case No.
I wish to speak before the	Coty Council		
	Name of City Agency, Department, Co	mmittee or Council	
Do you wish to provide general pu	ublic comment, or to speak for or agains	it a proposal on the agenda	? For proposal Against proposal
Name: 50	we kottrally		() General comments
Business or Organization Affiliation	in: AFSCM	7	
Address: 1280 5/10	etto Race 1	A	A 90013
Street Business phone: $323 - 30$	City 5 - lololoRepresenting:	FSCMS State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLI	ENT INFORMATION BELO	ow:
Client Name:			Phone #:
Client Address:	Oli.		
Street	City	State	Zip

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

CITY OF LOS ANGELES SPEAKER CARD Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. wish to speak before the Do you wish to provide general public comment, or to/speak for or against a proposal on the agenda? () For proposal Business or Organization Affiliation: Address: ____ City State Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: _____

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

State

Zip

City

Client Address:

Date 4-8-1/	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File I	No., Agenda Item, or Case No.
L	DECOMORABLE SE FISE OFFICE.		
I wish to speak before the	Coly Cony	rul	
	Name of City Agency, Department, Committee of	r Council	
			~ <i>f</i>
Do you wish to provide general p	public comment, or to speak for a against a propos	al on the agenc	da? (X) For proposal
Do you wish to provide general p	bublic comment, or to speak lover against a propos	ar on the agent	Against proposal
Name:	Jose Trunllo		Against proposal Seneral comments
Business or Organization Affiliation	on: AFSCUS	>	
Address: 125	W Shellof LA	CH	9001
Street	City	State	Zip
Business phone: 2/3-5	5(-(27 Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEI	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	<i>Z</i> ip

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

Date 03-08-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.		
I wish to speak before the	CITY CONCU			
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal () Against proposal				
	-D CUBATAN	() General comments		
Business or Organization Affiliat	ion: AFSCME LOC	AL 385		
Address: 514 S	hatto Place / Los Azques	90020 State Zip		
Business phone:	ion: ARSCME LOC hetto Place / Los Azylos B, G23-1069 City	State 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 3/8///	THE CITY COUNCIL'S F DECORUM WILL BE EN	RULES OF	File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departm	······································	
Do you wish to provide general p	oublic comment, or to speak for or	r against a proposal on the a	
Name: Tean 7	Fauck		() Against proposal () General comments
Business or Organization Affiliati	ion: Man Street	Canoga Pack/Ou	exmo oth Historia
Address: 7022 Wuddles 600 Street	ion: Man Street	S, Off State	>0C/ety - 9/367 Zip
	Representing:		
	A PAID SPEAKER AND PROVID	i.	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.

Property				
Date 3/8///	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	S OF	lo., Agenda Item, or Case No. I —	
I wish to speak before the	City Carrel			
	Name of City Agency, Department,	Committee or Council		
Name: Nona Ross	public comment, or to speak for or aga		(A) Against proposal (A) General comments	
Business or Organization Affiliati	on: Canoga Pack Wes	t this chamber	of Commerce	
Address: 1248 OWW	emun are cano	zapule CU	91303	
Business phone: Street	4400 Representing: Can	oga Paule) West.	Holls Chareber	
Business or Organization Affiliation: Canoga Pack West Holls Chamber of Commerce Address: 1248 Owensmuch and Canoga Pack CA 91303 Street City State Zip Business phone: 818884477 Representing: Canoga Pack) West Holls Chamber 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 process.

Date 3 8	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 o	r Council	n support of CRA
Do you wish to provide general (public comment, or to speak for or against a propos	sal on the agenda?	(4) For proposal
Name: Mary	Paterson		() Against proposal () General comments
Business or Organization Affiliat	ion: Canoga Park Improvement	Assa an	1 con BID Consun
	emmet Aue, CanogaPa	d, CA	9803
Business phone: (Signature)	7480 Representing: CPA CAN	1 myself	<i>Z</i> ip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELO	N:
Client Name:		Ph	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.

03-08-201	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Colonal Name of City Agency, Department, Committe	e or Council	
Do you wish to provide general p	public comment, or to speak for or against a pro		() For proposal() Against proposal() General comments
Business or Organization Affiliati	ion:		
Address: Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOV	W:
Client Name:		Ph	none #:
Client Address:	O.L.	Ot-1-	w .
Street	City	State	Zip

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

Date 3/8/11	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCED	
I wish to speak before the	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? (X) For proposal
Name: Robert	AKhavan	() Against proposal () General comments
Business or Organization Affiliati	ion: R-E Doveloper	
Address: 4335 VAN	NVYS BLVJ. #356	ShermanOaks, CA 91403 State Zip
Business phone: $818-96$	7-5706 Representing: Perso	· 1×
•	A PAID SPEAKER AND PROVIDE CLIER	
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	II'S BIII ES AE	Council File No.,	Agenda Item, or Case No.
2/8/11	DECORUM WILL E		3	7
	DECORORI WILL E	oe enfonced.		
I wish to speak before the	City	Corneil	Council	
	Name of City Agendy, De	pariment, Committee or	Councii	
Do you wish to provide general pr	ublic comment, or to speak	for or against a propos	al on the agenda?	(→For proposal
11000	Calali		•	Against proposal
Name: //d//d	<u> </u>			() General comments
Business or Organization Affiliation	on: ELA	<u> </u>		
Address: <u>530</u> S.	Buyle Ave	CA	CA	90033
Business phone 323 269-YZ	Y ext ² 2 7 Representing:	City KustLA Con	State MMUNI Ly (report from
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PR	ROVIDE CLIENT INFO	RMATION BELOV	v: /
Client Name:			Pr	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 3 8 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	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 agen			
Name: Flva OB	rien		Against proposal General comments		
Business or Organization Affiliati	ion: AFSCME LOCAL 58.	5			
Address: <u>2845 Pina</u> Street	hand Arehue Redards Leady City 1833 Representing: AFSCME	A State	50278		
Business phone: <u>243/977</u> -	-1833 Representing: AFSCME				
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 /8/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCE)F	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	ne of City Agency, Department, Cor	nmittee or Cour	ncil	
Do you wish to provide general public	comment, or to speak for or agains	a proposal on	the agenda	a? 🖄 For proposal
Name: Ben Hullips Business or Organization Affiliation: Address: \(\sum_{\text{Street}} \)				() Against proposal () General comments
Business or Organization Affiliation:	Mercy Housing			
Address: 1500 S. Gra	nd Avr. LA	<u>_</u> A	9	39015
Street Business phone: 213-743-52	City Representing:		State	Zip
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIE	NT INFORMA	TION BELO	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		
	3/8	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	ching-City Council & CRALLA	Board	
Name o	of City Agency, Department, Committee of	or Council	
Do you wish to provide general public com	nment, or to speak for or against a propo	sal on the agenda	
Name: Robin Hughes			() Against proposal () General comments -
Business or Organization Affiliation:	ode Communities		
Address: 101 E. 3°D Street	Sufe 400 Los Anyeles	CA	90013
Business phone: <u>U3 W5 2162</u>	City / Representing:	State	Zip
CHECK HERE IF YOU ARE A PAID S		ORMATION BELO	ow:
Client Name:			Phone #:
Client Address:		<u> </u>	
Street	City	State	Zip

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

MAR 8	11		OUNCIL'S RULES OF VILL BE ENFORCED.	1	No., Agenda Item, or Case No.
I wish to speak be	fore the				
		Name of City Agend	cy, Department, Commi	ttee or Council	
Do you wish to pro	ovide general į	oublic comment, or to	speak for or against a p	oroposal on the agen	
Name:	Jo H	N MOLLOY			() Against proposal (×) General comments
Business or Orgar	nization Affiliat	ion: PATH Ventu	es		
Address:	340 1	it Madison Ave	L#	CA	90004
	Street		City	State	Zip
Business phone:	323 621 1301	Represen	ting: PATH Ventur	& 3	
CHECK HERE IF	YOU ARE A	PAID SPEAKER A	ND PROVIDE CLIENT	INFORMATION BE	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.

Date 3/8///	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 pul	blic comment, or to speak for or against a prop	oosal on the agenda?	For proposal
Name: Nicol Sh	ahenian		Against proposal General comments
Business or Organization Affiliation	: Hollywood Chamber	of Come	ner l
Address: 7018 Holy	word Blud. LA, CA	90028	
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A I	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOV	v:
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.

Date 3-8-11	THE CITY COUNCI		Council File No., Ag	enda Item, or Case No.
I wish to speak before the	ancil			7
	Name of City Agency, Dep	partment, Committee o	or Council	
Do you wish to provide general p		for or against a propo	sal on the agenda? (
Name: Laureu			······································) Against proposal
Business or Organization Affiliati	ion: <u>Pacoima</u>	Beautiful	,	
Address: 11243 G	enoaks Blue	l stel	Pacoima	91331
Address: 1243 General Business phone: $88)899$	- 2454 Representing: _	City	State	Zip
CHECK HERE IF YOU ARE A				
Client Name:			Phon	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.

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal

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, Committed of	or Council

Business phone: _____ Representing: _____

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

,

Business or Organization/Affiliation:

Address: City

Client Address:
Street City State Zip

Client Name: Phone #:

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

) Against proposal
) General comments

State

Date 03 07 1	THE CITY COUNCIL'S RU DECORUM WILL BE ENF		Council File	No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departmen	nt, Committee or Co	ouncil	·
Do you wish to provide general p	ublic comment, or to speak for or a	gainst a proposal c	on the agen	da? () For proposal
Name: MICHAEL	Cortez			() Against proposal (X) General comments
Business or Organization Affiliation	on: Commondy Re	, developm	ent f	toenan of CA
Address: 6255 W S	unset Buil, Los	Anseles,	CA	91303
	Representing: AP			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORM	IATION BE	LOW:
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	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 p	public comment, or to speak for or against a propose	al on the agenda? () For proposal
Name: CUVOT	Antonio H. Vaguara	() Against proposal () General comments
Business or Organization Affiliati	ion: SALET	
Address: 1625 W	. Olympic blud. Svile 718	1 LA CA 50015 State Zip
Business phone: <u>24 (480</u> -	652 Representing: SACEF	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	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.

Date 3/8/11		ICIL'S RULES OF . BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, E	Department, Commit	tee or Council	
Do you wish to provide general p		•	•	() For proposal () Against proposal
Name: Aufor Communication Affiliation Affiliation Affiliation	silbert			(_) General comments
Business or Organization Affiliati	ion: Road Th	entre Co.		
Address: 5/0 g	Lankershim	Blup	No. Ho.	Bo 4/64
Business phone: 310-701-		•	Grate	ΣΙμ
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:			P	none #:
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date	THE CITY COUNCIL'S RULES OF		, Agenda Item, or Case No.
03-08-2011	DECORUM WILL BE ENFORCED.	15	157
	Special Joint n	nits	
I wish to speak before the		<u>ealla</u>	
	Name of City Agehcy, Department, Committee or	Council	
Do you wish to provide general p	public comment, or to speak for or against a proposa	al on the agenda?	
Name:	Jose Aguirar		(文) Against proposal () General comments
	on:		
Address:	·		
Address: Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	w: [
Client Name:		P	hone #:
Client Address:			
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 2/8//	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	enda Item, or Case No.
I wish to speak before the(A Could Name of City Agency, Department, Committ	tee or Council	
Do you wish to provide general pu	ublic comment, or to speak for or against a pi	roposal on the agenda? (
Name: RICK	STORF	(() Against proposal) General comments
Business or Organization Affiliatio	n: Chrisales		
Address:	S. Main ST	LA	
Business phone: 310 40	9 34 Lepresenting:	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

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

Date 3/8/201/	DECORUM	OUNCIL'S RULES OF WILL BE ENFORCED.	11008	Agenda Item, or Case No.
I wish to speak before the	City Council Name of City Agen	√ ∠ C RA cy, Department, Committe	ee or Council	. 4
Do you wish to provide general p	public comment, or to	speak for or against a pro	pposal on the agenda?	For proposal
Name: <u>JODY HU/</u> Business or Organization Affiliation Address: <u>951 N Address</u>	MMER			() Against proposal General comments
Business or Organization Affiliat	ion: Film	Bridge		
Address: 951 N	Broshung	LA	CA	90072
Street Business phone:	V		State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER A	IND PROVIDE CLIENT II	NFORMATION BELOV	v:
Client Name:		· · · · · · · · · · · · · · · · · · ·	Ph	one #:
Client Address:		O3.	Qi-i-	77
Street		City	State	Zip

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

Date 3/8///	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	ES OF	e 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 pu	ıblic comment, or to speak for or ag	ainst a proposal on the age	nda? () For proposal () Against proposal General comments
Business or Organization Affiliation	n:		\
Address: 1370 MANIA	A POUNT 1 #522	Mans del of	(SI 90257)
Address: 1370 WANN Street Business phone: (30)82207	City Representing:	State	Zip
	PAID SPEAKER AND PROVIDE	CLIENT INFORMATION B	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.

Date		Council File No., Ao	enda Item, or Case No.
	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		7
I wish to speak before the	Name of City Agency, Department, Committee	e or Council	V
1	public comment, or to speak for or against a pro	posal on the agenda? 🗦	
Name: Anna	Apostolas	() Against proposal) General comments
Business or Organization Affiliati			
	rilshire LA 9	0017	
Business phone: Street 2/3 6/2	City Representing:	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phor	ne #:
Client Address:	City	State	7ip

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

Date / //	i	COUNCIL'S RULES	OF	No., Agenda Item, or Case No.
I wish to speak before the	NAO HEA Name of City Age	TROVILO Hujj ency, Department, Co	MA IA & CONTINUE OF COUNCIL	De wed Joins Year
Do you wish to provide gene	ral public comment, or t	to speak for or agains	st a proposal on the agend	
Name: Name:	TRuji 110			() Against proposal () General comments
Business or Organization Aff	iliation:	Rosa fores i	los forias	
Address: Street				90028 Zio
Business phone:		•		
CHECK HERE IF YOU AR	E A PAID SPEAKER	AND PROVIDE CLI	ENT INFORMATION BEL	.ow:
Client Name:				Phone #:
Client Address:		City	State	Zio

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

Date 3/8/1/	THE CITY COUNC		Council File	e No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, De	partment, Committee	e or Council	
Do you wish to provide general p	oublic comment, or to speak	for or against a prop	oosal on the age	nda? () For proposal
Do you wish to provide general possible. Name: Syncology Business or Organization Affiliation	Menada K			() Against proposal () General commen
Business or Organization Affiliati	ion: Ward of	gres or Lisiae		
Address: <u> </u>	onsur he L	A 0.	CA	90019
Street		City	State	Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PI	ROVIDE CLIENT IN	FORMATION BI	ELOW:
Client Name:	·		· · · · · · · · · · · · · · · · · · ·	Phone #:
Client Address:Street				

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

Date 3/8/11	THE CITY COUNCIL'S DECORUM WILL BE E	RULES OF	ncil File No., Agenda Item, or Case No.
I wish to speak before the	City Caral Name of City Agency, Depart	ment, Committee or Council	
Do you wish to provide general pub	,		
Name: URA Sweeting	<u> </u>		() Against proposal () General comments
Name: <u>Ora Sweeting</u> Business or Organization Affiliation	Warp Killer	lesinen	
Address: 1177 Co. Address			d door
Street	City	Sta	ate Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROV	IDE CLIENT INFORMATIO	N BELOW:
Client Name:			Phone #:
Client Address:	City	Str	ate Zip
Ou co.	Oity		m/p

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

9-8-90N	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 Oity Agency, Department, Committee o	r Council	
Do you wish to provide general p	public comment, or to speak for or against a propos	al on the agenda	? () For proposal
Name: 'Jacke"	Dupont-Walker		() Against proposal () General comments
Business or Organization Affiliat	ion: Ward EDC & Alm		
Address: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	one 181 Las Angeles	State	90 007 Zip
Business phone: $212-747$	1133 Representing: Dely		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	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 3-8-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	or Council	
Do you wish to provide genera	al public comment, or to speak for or against a propo	sal on the agenda	
Name: RON	KAYE		() General comments
Business or Organization Affili	iation: LA COAN SULLO	b	
Address: Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	w:
Client Name:		P	hone #:
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 7 A - 3 11	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case	
3-8/0011	DECORUM WILL BE ENFORCED.	15, xile 11-008	6
I wish to speak before the	City Council	57	············
Name	e of City Agency, Department, Committee o	r Council	
Do you wish to provide general public or	omment, or to speak for or against a propos	sal on the agenda? (For proposal () Against propo	eal
Name: Franc	isco Kivera	() General comm	
Business or Organization Affiliation:	1 Resente & nation	of Cartral Angerican Po	un Jah
Address: 150/W	8th ST., Suite	100, LA CA 900/	I
Business phone: $(2/3)$ 397-329	Representing: Central Ame	State Zip -	Ty
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	PRMATION 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.

<u></u>				
Date	THE CITY COUNCIL'S	RULES OF	Council File N	o., Agenda Item, or Case No.
3-8-2011	DECORUM WILL BE E	1		57
			<u>, </u>	
I wish to speak before the	CIT	glouncie	* Cl	A Court
	Name of City Agency, Departr	nent, Committee or C	ouncil	
Do you wish to provide general	public comment, or to speak for o	or against a proposal	on the agenda	
Name:	HARON M.Y. Con	E		() Against proposal () General comments
Business or Organization Affiliat	tion: ASIAN PACIFIC	c Scaupea (RESERVE	AMELICA
Address: 4567 Mu	UTNOMAIT ST.	5 COALITIO	NCA	90032 Zip
Street Business phone: 323-		All	State	Zip
	A PAID SPEAKER AND PROVI	DE CLIENT INFORI	MATION 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 3/8/11	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	SOF	No., Agenda Item, or Case No.
I wish to speak before theCITY OF LOS ANGELES - 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 proposal on the agenda? () For proposal () Against proposal () General comments			
Business or Organization Affiliation: AFSCME - COUNCIL 36.			
Address: 1260 Street	W. 7th STREET	Los ANGELES,	CA 90017
	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 3/8/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No. #57	, Agenda Item, or Case No.
I wish to speak before the	cty Council	O-w-ell	
4	Namelof City Agency, Department, Committee or ublic comment, or to speak for or against a proposa		() Against proposal
Name: ESTELA L Business or Organization Affiliation		ISSN	() General comments
Address: 725 S. C	City	State	90021 Zip
Business phone: 213 228 8 CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELO	w: [
Client Name:		P	hone #:
Client Address: Street	City	State	Zip

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

NOTE: THIS IS A TOTAL

Date 3-8-1/	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.			
I wish to speak before the		or 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 Name:				
Business or Organization Affiliati	on: Thai Community Jucca Street, Ste B Los	Development Cenk			
Address: Street (323) 4.	fuccastreet, Ste B Los 68-185 Representing: That COC	Angeles, CA 90028			
	PAID SPEAKER AND PROVIDE CLIENT INFO				
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 chairners

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Date 3/8/11	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCES	PF	o., Agenda Item, or Case No.		
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? (X) For proposal Name: (3) R () General comments					
Business or Organization Affiliati	•				
Address: 500 W Street Business phone: 112 481	107 Representing:	CA VOIC	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 chairners on

NOTE: THIS IS A PUBLIC TO

Date SHARZOU	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 pu	ublic comment, or to speak for or against a prop	osal on the agenda?	() For proposal () Against proposal General comments
Business or Organization Affiliatio	on:		<i>¥</i>
Address:Street	City	State	Zip
	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	IAI -
CHECK HERE IF YOU ARE A	I NAME OF THE PROPERTY OF THE		AA.
	TAID OF EARCH AND FROVIDE OFFERT IN		none #:

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

Date 7/3/10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No.
I wish to speak before the	CLA & COVACI		
	e of City Agency, Department, Committee or	Council	
Do you wish to provide general public co	omment, or to speak for or against a proposa	I on the agenda?	For proposal () Against proposal () General comments
	1101	12 1	
Business or Organization Affiliation:	WWb AN DESIGN	CONTER	
Address: 10 B	UNBAN DESIGN DX 8630 CA CA	90001	9
Business phone: Old 7/2-99	City Ob Representing:	State	Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELOW	7: [
Client Name:		Pho	one #:
Client Address:Street		Chah	o de la constanta de la consta
Street	City	State	Zip

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

MULE: ARIC ..

	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theName o	Angeles CIty Contribute or City Opening on Cit	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Do you wish to provide general public con	nment, or to speak for or against a propose	
Name:	HRMENAK NOURI	Against proposal General comments
Business or Organization Affiliation:	DEMOCRATIC F	ARTY
Address: $2950 V$	An BUDEN PLACE	- Los Angeles CA 9000)
Business phone: 323~445-1600	Representing: SEL	F State Zip
CHECK HERE IF YOU ARE A PAID S	PEAKER AND PROVIDE CLIENT INFO	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 officers.

Date 3/8/1/	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	LES OF July	File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department	t, Committee or Council	
Do you wish to provide general p	ublic comment, or to speak for or ac	gainst a proposal on the ag	jenda? For proposal
Name: Joy Bro	ron-free frice		() Against proposal () General comments
/ Business or Organization Affiliation	on: AFSCALE-CRA		
Address: <u>///////////////////////////////////</u>	o 711 A	CA	90017
Business phone: (213) 99	7 26/8 Representing: Loc	tal 585- Profes	Sional Unit
•	PAID SPEAKER AND PROVIDE		
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.

March 8, 200	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCE	57	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Con	nmittee or Council	
Do you wish to provide general p	oublic comment, or to speak for or against	a proposal on the agenda?	
Name: Tulia Jose	ph		Against proposal General comments
Business or Organization Affiliati	ion: Myself, Small busi	ness employee, De	16/10 Education
			advocate
Business phone: $(2/3)$ $(2/2)$	Ave Los Angeles City 12/2 Representing: Myself	State	Zip
	A PAID SPEAKER AND PROVIDE CLIE	NT INFORMATION BELOW	/ :
Client Name:		Pho-	one #:
Client Address:			
Street	City	State	Zip

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

Date 03/08/W		INCIL'S RULES LL BE ENFORC	i	Council File No	2., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency,	Department, Co	ommittee or Co	ouncil	
Do you wish to provide general p	oublic comment, or to sp	eak for or again	st a proposal o	on the agenda	n? (X) For proposal
Name: Mary Silv	erstern				() Against proposal () General comments
Name: Mary Silv Business or Organization Affiliati Address: 1200 Wilsh Street	ion: LOS Ange	les Ho	using	Part	inership
Address: 1200 Wilsh	ive BIVD 8	Le 307	teal	tngeles	CA 900/7
Business phone: 213629 91				Signe	210
CHECK HERE IF YOU ARE A	, ,		IENT INFORM	IATION BELO	ow:
Client Name:					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.

CITY OF LOS ANGELES SPEAKER	CARD
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 or	Council
Do you wish to provide general public comment, or to speak for or against a proposa	al on the agenda? () For proposal () Against proposal
Name: Russell Brown	() General comments
Business or Organization Affiliation: HDB (B)	
Address: I(4 Co. 5th St LA CA	9013
Business phone: 23990379 Representing: City +DB (D	State Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:	Phone #

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

City

State

Zip

Client Address: ____

	CITY COUNCIL'S RULES OF DRUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Name of City	y Agency, Department, Committee	or Council
Do you wish to provide general public commen	t_or to speak for or against a prop	osal on the agenda? () For proposal
Name:	UKSON,	Against proposal () General comments
Business or Organization Affiliation:	hrewoodhighlu	1ds, con 1
Address: 236 50.4	Ave 60, LA	Ca 90042
Business phone Street Re	epresenting:	State Z.Ip
CHECK HERE IF YOU ARE A PAID SPEAK	KER AND PROVIDE CLIENT INF	FORMATION 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.

3/8/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	No 57 WOSA
I wish to speak before the	Course Name of City Agency, Department, Committee of	or Council
Do you wish to provide general p	public comment, or to speak for or against a propos	
Business or Organization Affiliati	ion: Cherien Americal City	us Allace
Address: 5474	W. 76th St, Los Angele 1369 Representing: Chuese Am. C	es CA 90045
Business phone: 3/0-645	1369 Representing: Church Am. C	Usigas Allance
	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:	· · · · · · · · · · · · · · · · · · ·	Phone #:
Client Address: Street	City	State Zlp

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

Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	
wish to speak before the	Name of City Agency, Department, Comm	nittee or Council
Do you wish to provide general p	public comment, or to speak for or against a	
Name: Hhdre	w G1055	() Against proposal General comments
Business or Organization Affiliat	ion: Thomas Salia	4 Associates
	San Victor Bodend	`
Business phone:	Representing: Thuras	gation of Assorter.
CHECK HERE IF YOU ARE A	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 3/8///		OUNCIL'S RULES OF	Council File No	., Agenda Item, or Case No.
	DECORDIVI VV	ILL BE ENFORCED.	4000	30% W., N
I wish to speak before the	Watte C Name of City Agenc	CH ZENS/ y, Department, Comm	HomeLoss ittee or Council	Revention
_			/ **	COUNTY TO THE TOWN /C
Do you wish to provide general			oroposal on the agenda	
Name: Pastor W	tuart Por	ham		Against proposal General comments
Business or Organization Affiliat	ion: Watts	Academy	, Vocation	na
Address: 650 h	1 109th	St. /	LA	90044
Street Business phone: $323-402$	-522/ Represent	ing: Watts	Chamber o	f Commerce
CHECK HERE IF YOU ARE	A PAID SPEAKER AN	ID PROVIDE CLIENT	INFORMATION BELO	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 3/8/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
wish to speak before the	Name of City Agency, Department, Committe	ee or Council
Do you wish to provide general pu	blic comment, or to speak for or against a pro	posal on the agenda? (1 For proposal
Name: UHA N	150N	() Against proposal () General comments
Business or Organization Affiliation	1: DRO HOUSING C	oer .
Address:		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	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.

THE CITY COUNCIL'S RULES OF

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

Date

2-8-11	DECORUM WILL BE ENFOR	CED. 178	M4557
I wish to speak before the	COUNCIL		
•	Name of City Agency, Department,	Committee or Council	
_	public comment, or to speak for or aga	inst a proposal on the agend	() Against proposal
Name: PHILIP AAI			() General comments
Business or Organization Affiliat	ion: MULKNIUM HE	144W00D	
Address: 1680 N. VM	18 ST \$1000 City	HOLLYWOOD	90028
Business phone: 310 36 4 4	*	/ State	Zip -
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE C	LIENT INFORMATION BEL	ow:
Client Name:			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.

Date 2 .8 -//	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Ca	se No.
I Wish to speak belore the	DUNC/L Name of City Agency, Department, Committee		
Do you wish to provide general	oublic comment, or to speak for or against a prop	posal on the agenda? (For proposa	
Name: LAURIE GO	LDMAN	() Against pro () General cor	
Business or Organization Affiliat	ion: CENTRAL HOLLYWOOD NO	C + HOLLYWOOD ANTS C	CINCK
Address: 1680 N. 1/1 NE	2 51 # 1000 ZA CA	90028	
Business phone: Street	ion: CENTRAL HOLLYWOOD NO E 57 # 1000 LA CA City DAY & Representing: CHM -	State Zip A HAC	
	A PAID SPEAKER AND PROVIDE CLIENT IN		•
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 - 8 - 1/	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	F. 1	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Com	mittee or Council	
Do you wish to provide general pub	olic comment, or to speak for or against	a proposal on the agenda?	
Name: Alfredo Hernodez	*		Against proposal General comments
Business or Organization Affiliation	: EAST Hollywood New	Whorhood Council	
Address: <u>678 N. Van</u> Am	EAST Holywood News	State	90009 Zip
	Representing:		
CHECK HERE IF YOU ARE A P	PAID SPEAKER AND PROVIDE CLIER	NT INFORMATION BELOV	N:
Client Name:		Ph	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.

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Wish to speak before the Name of City Agency, Department, Committee or City Agency, Department, City Agency, Department, City Agency, Department, City Agency, City Agency	Council File No., Agenda Item, or Case No.
Do you wish to provide general public comment, or to speak for or against a proposa	() Against proposal
Name: Wall Tolling	() General comments
Business or Organization Affiliation: ABA BUSINESS	
Address: 2509 & Cantral Aul L. A	State Zip
Business phone: 2137493237 Representing: CAA	'
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
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 3-8-2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	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	
Name: Jerold N	leuman	() Against proposal (K) General comments
Business or Organization Affiliat	ion: Sheppard Mulling	
Address: 333 S. //	ope Street, 434FTr Los An	seles, CA 90071
Business phone: 2/3-6/7	5563 Representing: Millenium	Partyers
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW: 🔀
Client Name: Millenium	Partners	Phone #:(323)464~1673
Client Address: 1680 N.	Vine St Svite 1000 Los Angeles,	
	or important information and submit this entire care	

3 · 8 · 2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide gener Name: BILL HAI	al public comment, or to speak for or against a propo $\mathcal{R}\mathcal{R}\mathcal{B}$	osal on the agenda?	For proposal Against proposal General comments
	liation: HOLLYWOOD COMMON ITY		
Address: 5030 Street Business phone: 323.4	SANTA MONICA BLYD LOS AN SY. 621D Representing: HCHC	State	<i>9002</i> 9 Zip
•	E A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW	/ :
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 3/9/11	THE CITY COUNC		ſ	o., Agenda Item, or Case No. 54
I wish to speak before theN	Alame of City Agency, De			etis-cpa & Cut
Do you wish to provide general pub	lic comment, or to speal	for or against a pr	oposal on the agenda	
Name: <u>HWAN BRA</u>	DY			()Against proposal (☑)General comments
Business or Organization Affiliation:	' , , , , ,			
Address: 5250 N Low 1	1	NoAL Horbas	DOD CA	91601
			State	Zip
Business phone: <u>\$(\$-423-212</u>	Representing:	niply		
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND P	ROVIDE CLIENT	NFORMATION 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/Time Submitted 03/08/2011 11:43 AM		Council File No., Agenda Item 57	i, or Case No.
I wish to speak before the	Соц	ncil	
	Name of City Agency, Depar	tment, Committee or Council	
Do you wish to provide general public Name:	daraha da adalah sabat da <u>da melambah da mengahan</u> bara pilaba da kalandaran	t a proposal on the agenda?	() For proposal () Against proposal () General commen
Business or Organization Affiliation:	Min Fogle		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID S	PEAKER AND PROVIDE CLIENT I	INFORMATION BELOW:	
Client Name:		Phone No.:	
Client Address:		City State	Zip

Date/Time Submitted 03/08/2011 11:42 AM		Council File No., Agenda Item, or Case No.	
I wish to speak before the	Counc	<i>I</i>	
	Name of City Agency, Departme	nt, Committee or Council	
Do you wish to provide general public cor Name:		proposal on the agenda?	() For proposal () Against proposal _() General comment
Business or Organization Affiliation:			
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID SPE	AKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone No.:	
Client Address:		State	7/h

Date/Time Submitted 03/08/2011 11:42 AM			Council File No., Agenda Item, or Case No. 57	
I wish to speak before the		Council		
	Name of City Ager	icy, Department, (Committee or Council	
Do you wish to provide general Name:	public comment, or to speak for o <i>Wayne <u>Katersk</u>y</i>		posal on the agenda?	
Business or Organization Affilial	ion:			
Address:				
Street		City	State	Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE C	LIENT INFOR	RMATION BELOW:	
Client Name:			Phone No.:	
Client Address:				
Stre	et data kanan k	City	State	Zip

Date/Time Submitted 03/08/2011 11:42 AM		Council File No., Agenda Item, o	or Case No.
wish to speak before the	Counci	1	
	Name of City Agency, Departmen	t, Committee or Council	
Do you wish to provide general public on Name:	가는 사람들은 이 가는 사람이 가는 것이 되었다고 하고 있는 것이 되었다고 하는 것이 되었다. 그는 사람이 되었다.	proposal on the agenda?	() For proposal () Against proposal () General comment
Business or Organization Affiliation:			
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID SI	PEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone No.:	
Client Address:	City	State	Zip

3 · 8 · 2011	THE CITY COUNCIL'S DECORUM WILL BE E		Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departs		Council	
Do you wish to provide general p	, ,			ı? (Ⅺ For proposal
Name: BILL HARK				Against proposal General comments
Business or Organization Affiliati	ion: HOLLYWOOD	COMMON ITY	HOUSING	CORP
Address: 5000 54	NTA MONICA BLYE	LOS ANGI	ELES CA	90029
Business phone: 323.45	•	HCHC	State	Zip
CHECK HERE IF YOU ARE A		DE CLIENT INFOR	MATION BELO	ow:
Client Name:			l	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 3/8/11	THE CITY COUNCIL'S RUI DECORUM WILL BE ENFO	LES OF	incil File No., Ager リーロの名名	nda Item, or Case No. 457
I wish to speak before the	Name of City Agency, Departmen	t, Committee or Counci		5- CPA = Cot
	public comment, or to speak for or a	gainst a proposal on the	e agenda? () For proposal) Against proposal
Name: <u>STEVEN BR</u>	-ADY		(v) General comments
Business or Organization Affiliati	on: CA/A		***************************************	
	Mershin Aorth City	Holpood C	A State	9/60/ Zip
Business phone: 8(8-423-	2129 Representing: Mux	Jly		
	() A PAID SPEAKER AND PROVIDE	Ö	ON BELOW:	
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

CLLE UP MODERNOON ...

Date/Time Submitted 03/08/2011 11:43 AM

I wish to speak before the	Counc	zil	
patan Consuperation (percentage)	Name of City Agency, Departme	ent, Committee or Council	
Do you wish to provide general public co	omment, or to speak for or against a Marian Katersky	proposal on the agenda?	() For proposal () Against proposal () General comment
Business or Organization Affiliation:	Mria Fogle		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID SP	EAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
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Client Address:			
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Date/Time Submitted			
03/08/2011	11:42	AM	

I wish to speak before the	Соилс	il	
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Do you wish to provide general public co Name:	mment, or to speak for or against a Donna Pearlman	proposal on the agenda?	() For proposal () Against proposal () General comment
Business or Organization Affiliation:	er Regularizat de New Popula de Maria (Maria Popula and Alla September 1984), popularizat de New Popula and Alla September 1984, popularizat de New Popularizat de Ne		
Address:			
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Business phone:	Representing:		
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Client Address:		State	7in

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Business phone:	Representing:			
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Date/Time Submitted 03/08/2011 11:42 AM

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Do you wish to provide genera Name:	al public comment, or to speak for rick nightenga	_	osal on the agenda?	() For proposal () Against proposal () General comment
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Address:		· 		
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Business phone:	Representing:			and or the state of the state o
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