Date 3/29/2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.			
I wish to speak before theNam	e of City Agency, Department, Committee or	Council			
	comment, or to speak for or against a propos				
Name: CASSANDRA	ZEBISCH	() Against proposal () General comments			
Business or Organization Affiliation:	AEG				
Address: Street	CBIVA+305, LB	(A) 900\5 State Zip			
Business phone:		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 03-29-11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		enda Item, or Case No.
wish to speak before the	Name of City Agency, Department, Comm		
Do you wish to provide/general p	oublic comment, or to speak for or against a	proposal on the agenda? (
Name: ' HRME	NAK NOURIDIANIA	V ?	Against proposal General comments
Business or Organization Affiliati	on: <u> EMOCRA</u> +FC	PARTY	
Address: 2950	VAN BUREN PLAG	FART, Plas And	ELES CA GOGOY
Business phone: 323-445	-1600 Representing: SE	, State	Δih
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELOW:	
Client Name:		Phor	ne #:
Client Address:	City	State	Zip
Oliogi	Oity	Olulo	- '∀

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

3.29.20N	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	ne of City Agency, Department, Committee of	Chuncil Comma
Do you wish to provide general public of	comment, or to speak for or against a proposi	
Name: SUMMU	Kenworth	() Against proposal () General comments
Business or Organization Affiliation:	CA Chamber of	Commerce
Address: 350 S	Boll	M 90017
Business phone: 3.580.753	Representing: City VIII VIII	State Zip /
	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 3/25/25))]		TY COUNCIL'S RULES (UM WILL BE ENFORCE		- AND TO BE -	File No., Ag	enda Item, or Case No.
I wish to speak be	fore the		Agency, Department, Cor	mmittee or (Council		
Do you wish to pro	ovide general	public comment,	or to speak for or agains	a proposal	on the a	genda? (X) For proposal
Name:	Shicaz	Janari				() Against proposal) General comments
Business or Orgar	nization Affiliat	tion:	Dountown LA	Nershb	arpaga	Conci	
Address:					CA		900)3
, radi 0001	Street		City		State	9	Zip
Business phone:		Rep	resenting:				
CHECK HERE IF	YOU ARE	A PAID SPEAKE	ER AND PROVIDE CLIE	ENT INFOR	MATION	BELOW:	
Client Name:				·		Pho	ne #:
Client Address:					State		Zip
	Street		City		State	B	ΖIÞ

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

Date 3/29/11	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 Oity Agency, Department, Committee	or Council
Do you wish to provide general pu	blic comment, or to speak for or against a prop	
Name: Name: WEC WG	K	() Against proposal
Business or Organization Affiliatio	n:	
Street	VA POME S. St. F. T. Was	M dull CSOGOTG'
Business phone: 130/622	7735 Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
Oliteel	Ony	Ciaic Zip

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

3/29/11	THE CITY COULD DECORUM WILL			Council File No	., Agenda Item, or Case No. √0 — 11 ~ 01 06
I wish to speak before the	Name of City Agency,	U MG Department, Cor	nmittee or C	ouncil	
Do you wish to provide general p	public comment, or to spe Twan F Wa	eak for or against	a proposal	on the agenda	? (X) For proposal () Against proposal () General comments
Business or Organization Affiliati	on: VICA	<i>(</i> 1)	0	C 1	Alus
Address: 5121 Street	Jangara July	Sherman City	Oaks	State	7/403 Zip
Business phone: 818 81			INT INFODE	MATION DEL	NW.
Client Name:	TAID STEAKEN AND	FROVIDE CLIE	INT INFOR		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 3/29/11		OUNCIL'S RULES OF WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the	City Cour Name of City Agen	cy, Department, Comm	nittee or Council	
Do you wish to provide general p	oublic comment, or to	speak for or against a	proposal on the agen	
Name: Tracy Raf Business or Organization Affiliati	ter			() Against proposal () General comments
Business or Organization Affiliati	on: 32 Fea	1		
Address: 1000 N Ala	meda St	City	C A State	90012 Zip
Business phone: 818,429.	0862 Represer	nting:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER A	AND 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 3/29/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	nda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
/ 1	public comment, or to speak for or against a prop	osal on the agenda? (
Name: KOBBIE	HUNTER	() Against proposal) General comments
Business or Organization Affiliati	ion: LOS ANGELES BUILDING	TRAPES COU	INCIL
Address: 1626 BE	VERLY BLUD CA GOOZ	6	*
Street Business phone:	VERLY BLVD CA GOOZ City Representing: BVILDING -	State TRAY = C	Zip
	A PAID SPEAKER AND PROVIDE CLIENT IN		
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 3-27-//	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			
	public comment, or to speak for or against a prop	osal on the agenda? (※) For proposal () Against proposal			
Name: Skickers SL	<u>ewson</u>	() General comments			
Business or Organization Affiliat	ion: WO BUILDING TRADES	Council			
	BEVERLY BLUD, LA, CA				
Business phone: 213 483-	4222 Representing: SME	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 29/((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	ee or Council
Do you wish to provide general public co	mment, or to speak for or against a pro	
Name: Russell Brow	the take	(1) Against proposal (1) General comments
Business or Organization Affiliation:	HOBID/ DUAK	
Address: 114 W. St	in St LA	CA 90013
Street Business phone: 213999937	Representing: City DB (D	State Zip
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT II	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 3/29/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Nam	e of City Agency, Department, Committee or	1tem 1 and Council
Do you wish to provide general public c	omment, or to speak for or against a proposa	al on the agenda? () For proposal
Name: HAM ID	BEHDAD	() Against proposal () General comments
Business or Organization Affiliation:	Central city Dos	relopment Group
Address: 1010 Linkhin	In Amilia	State Zip 40077
Business phone:	Blvd. Suite 101	LA CA
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE 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.

Date 3 / 29 / 11	THE CITY COUNCIL'S RULE: DECORUM WILL BE ENFOR	5 OF .//	o., Agenda Item, or Case No.		
I wish to speak before the	Cty Coun	- 402-	# 10		
inam	e of City Agéncy, 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:	Menzen		() General comments		
74116	1 2 11 6		-		
Business or Organization Affiliation:	May tresters	0 LLV			
Address: 5/5	5. Flower				
Street Business phone: 213683 - &		and in Interne	tion of		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name: Hansie	1 Late		Phone #:		
Client Address:	B. Wishire 1	Revd CA			
Street * d	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	Council File No., Agenda Item, or Case No.
3/29/11	DECORUM WILL BE ENFORCED.	#10 11-0106 Sigh district
		Sigh district
I wish to speak before the	Name of City Agency, Department, Commit	,
	Name of City Agency, Department, Commit	tee or Council
	public comment, or to speak for or against a p	
Name: <u>Jan</u>	Book	(X) Against proposal () General comments
Business or Organization Affilia	tion:	
Address:Street		0.1
		State Zip
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 3/29/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Sign Listrict
I wish to speak before the	Name of City Agency, Department, Committee or		
	olic comment, or to speak for or against a propos		
Name: <u>Pennis</u>	Hathaway		(X) Against proposal () General comments
Business or Organization Affiliation	Hathaway : Coalition to Ban	Bellb.	oard Blight
Address:	<u> </u>	2	
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION 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.

D-4-			
Date	THE CITY COUNCIL'S RULES OF	Council File No., Ager	nda Item, or Case No.
	DECORUM WILL BE ENFORCED.	#10	11-0106
		Sign	11-0106 Uistrici
I wish to speak before the	Name of City Agency Department, Committee or C		
,	Name of City Agency, Department, Committee or	Council	
	oublic comment, or to speak for or against a proposa	<u> </u>) For proposal) Against proposal
Name: $\angle avva$	Silagi.	() General comments
	ion:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELOW:	
Client Name:		Phone	e #:
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 3 - 7 0	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before theNam	e of City Agency, Department, Committee	or Council	
Do you wish to provide general public of	comment, or to speak for or against a prop	osal on the agenda?	
Name: Janes E	Imendant		() Against proposal () General comments
Business or Organization Affiliation:	CAANE		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:		Pl	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.

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Date	THE CITY COUNCIL'S RULES OF		., Agenda Item, or Case No.
3-29-11	DECORUM WILL BE ENFORCED.	11-01	
	C . \rightarrow . A	WICSH	DISTRICTO
I wish to speak before the	Name of City Agency, Department, Committee or		
Daniel La consider consumer			O /) Far proposal
Do you wish to provide general p	public comment, or to speak for or against a proposa	u on the agenda	
	BARBARA BROWE		Against proposal () General comments
Business or Organization Affiliat	ion: Westwood South of Santa PO Boy 64213 City	Monica	Blvd Ho4
Address:	PO BOY 64213	LA	90064
Street	City	State	ZIP I
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:Street			
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>

	HE CITY COUNCIL'S RULES OF ECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the Name o	COUNCL f City Agency, Department, Committee or	r Council	
Do you wish to provide general public com	ment, or to speak for or against a propos	al on the agenda?	
Name: ROSa Rive	ra		Against proposal General comments
Business or Organization Affiliation:	Hebere Local		
Address: <u>306</u> Street	no St. L.A		90023
Business phone: <u>323 244 - 743 9</u>			Zip
CHECK HERE IF YOU ARE A PAID SI	PEAKER AND PROVIDE CLIENT INFO	PRMATION BELO	w:
Client Name:		Pt	none #:
Client Address:Street	City	State	Zip

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

Date	THE ALTA AND THE EAST	Council File No., Age	enda Item, or Case No.
3-29-11	THE CITY COUNCIL'S RULES OF	11 0100	(#10)
	DECORUM WILL BE ENFORCED.	11-0106	("10)
		/	
	City Council		
I wish to speak before the			
	Name of City Agency, Department, Commi	ttee or Council	
Do you wish to provide general r	oublic comment, or to speak for or against a p	proposal on the agenda? ()	Ø For proposal
		oroposai on the agenda: 🗸) Against proposal
Name: ANNE M	VILLIAMS	() General comments
• • •		}	
Business or Organization Affiliati	ion: CENTRAL CITY AS	SOCIATION	
	have Blud Suite 200	LA,CA &	0017
Street	City	State	Zip
Business phone: 213-62	4-1213 Representing: manbe	ship <	
•	, , , , , , , , , , , , , , , , , , , ,		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:	1
O N		-	
Client Name:		Phor	ıe #:
Client Address.	$T : Y \to T^{-1/3}$		
Client Address: Street	City	State	Zip
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Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date 3) 3 9 11		OUNCIL'S RULES OF VILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before theNam	<u> </u>	cy, Department, Committe	ee or Council	
Do you wish to provide general public o	comment, or to	speak for or against a pro	oposal on the agenda	
Name: Tomny FORTUP	SC			() Against proposal () General comments -
Business or Organization Affiliation:		cocot li		
Address: 8333 Avgot 1	3/10/	City	State	90045
Business phone:		•		P
CHECK HERE IF YOU ARE A PAID	SPEAKER A	ND PROVIDE CLIENT I	NFORMATION 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.

3)99/11		INCIL'S RULES LL BE ENFORC	OF #1	l File No., Agenda Item, or o	Case No.
I wish to speak before the	CITY &	•	ommittee or Council		
Do you wish to provide general	public comment, or to sp	eak for or again	st a proposal on the a		
Name: KWIN I	NOPTON			() Against p () General c	
Business or Organization Affiliat	ion:	LOCAL	Community Commun		
Business or Organization Affiliat Address: Street	or Blud.	LA	(A Stat	9004	5
Business phone:			Siai	ε Ζίρ	
CHECK HERE IF YOU ARE A	A PAID SPEAKER ANI	PROVIDE CLI	ENT INFORMATION	BELOW:	
Client Name:				Phone #:	
Client Address:					
Street		City	Stat	e Zip	

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
	DECORUM WILL BE ENFORCED.	[]
	Name of City Agency, Department, Committee	e or Council
Do you wish to provide gene	eral public comment, or to speak for or against a prop	posal on the agenda? () For proposal
Name: Kev	N 13155	() Against proposal () General comments
Business or Organization Af	M Bass filiation: Painters & Alli	ed Trades
Address: Street	A.,	
	City Representing:	State Zip
•	RE A PAID SPEAKER AND PROVIDE CLIENT IN	
Client Name:		Phone #:
Client Address:	City	State Zip

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

Date

3-29-11	DECORUM WILL BE ENFORCED.	lo	
I wish to speak before the	Name of City Agency, Department, Committee		
Do you wish to provide general	public comment, or to speak for or against a prop	osal on the agenda? (💢) For	proposal
Name: MaMA	Flena Dugzo	() Ge	neral comments
Business or Organization Affiliat	ion: LA compy Federation of	Labor	
Address: 2130 W	ion: LA compy Federation of James M wood Blud City	LA A 90 State Zip	012
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INI	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.

Date 3/29/11	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORC	OF	No., Agenda Item, or Case No.
I wish to speak before theNan	ne of City/Agency, Department, Co	ommittee or Council	
Do you wish to provide general public	comment, or to speak for or again	st a proposal on the agen	
Name: Orace			() Against proposal() General comments
Business or Organization Affiliation:	Korean American	Coalition	
Address: 3540 Wilshim		A	90018
Street Street Business phone: <u>213 365.59</u>	199 Representing: City	ean American	Community
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 3/29/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before theNar	me of City Agency, Department, Committee	e or Council	
Do you wish to provide general public Name:	comment, or to speak for or against a pro	posal on the agenda? (X) For proposal (X) Against proposal (X) General comments	
Rusiness or Organization Affiliation:	SNC Equipment		
Address: 1875 W. Ke (Street) Business phone: 310-515-4	Jondo Boach Blvd # 10 715 Representing:	Da, Grana, CA 90249	
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 Tue 3/29/11	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
	ame of City Agency, Department, Commit	ttee or Council	
Do you wish to provide general publi	c comment, or to speak for or against a p	proposal on the agenda? (**) For proposal	
Business or Organization Affiliation:	LOCAL TILE RETN JORC	ing Iron workers	
Address: /5850 SHA Street Business phone 62 8(8/25	ANTONIO OVORUSALA City Pepresenting:	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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Data

Client Address:Street		City	State	Zip
Client Name:		<u> </u>	F	Phone #:
CHECK HERE IF YOU ARE A	PAID SPEAKER	AND PROVIDE CLIENT	INFORMATION BELO	ow:
Business phone: 562-868-	1251 Repre	senting:		
Address: <u>13830 SAU AUT</u> Street	OHLO DZ.	HORMALK	CA. State	96651 Zip
Business or Organization Affiliati	on: LOCAL 411	o REINFORCIUS 1	RONWORKERS	
Name: WAYLON SPE	MCER			() General comments
Do you wish to provide general p	oublic comment, or	to speak for or against a	proposal on the agenda	?(//) For proposal ()Against proposal
		gency, Department, Comm	ittee or Council	
I wish to speak before the	TY COUNCI	<u></u>		
3/29/2011		M WILL BE ENFORCED.	AGENDA	410
Date	THE CITY	COUNCIL'S RULES OF		., Agenda item, or Case No.

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NOTE: THIS IS A PUBLIC DOCUMENT.

Date 3/29/11 Rec	HE CITY COUNCIL'S RULES OF ECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 11 0106 Ttem 17 St Speaker
I wish to speak before the	City Agency, Department, Committee or	Council
Do you wish to provide general public com	ment, or to speak for or against a propos	al on the agenda? 🄀 For proposal
Name: James A	homas	() Against proposal () General comments
Business or Organization Affiliation:	usmas Properties	5
Address: 515 S. Flore	ser Street, CA	State Zip
Business phone: <u>2136131905</u>		State Zip
CHECK HERE IF YOU ARE A PAID SP	EAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:	· · · · · · · · · · · · · · · · · · ·	Phone #:
Client Address:	City	State 7in

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

MARCH 29, 2011	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	ITEM # 1	
I wish to speak before the	OS ANGELES CITY COUNCIL Name of City Agency, Department, Committee or	or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a proposon on: FAST (FIXING ANGELINOS STUCK	sal on the agenda? (🎾 For proposal	ts
Business or Organization Affiliati	on: FAST (FIXING ANGELENOS STUCK	IN TRAFFIC)	
Address:			
Business phone: (213) 233 · 2	City Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:	
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 RULES OF DECORUM WILL BE ENFORCED		
I wish to speak before the	Name of City Agency, Department, Com	Were Spens Public mittee or Council	
Do you wish to provide general p	public comment, or to speak for or against a	a proposal on the agenda? () For proposal	
Name:	n WALSH	() Against proposal () General comments	
Business or Organization Affiliation:			
Address:	265 Jacast #C		
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 Zin	

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

Date 3/29/11	THE CITY COUNCIL'S RULES OF CORUM WILL BE ENFORCE)r / (e No., Agenda Item, or Case No.
I wish to speak before the	Mame of City Agency, Department, Co	mmittee or Council	
Do you wish to provide general p	oublic comment, or to speak for or agains	t a proposal on the age	nda? (L) For proposal
Name: Dayld Ker	34		() Against proposal () General comments
	on: Carpenters/Contrac	tors coop.	Lamm.
Address:	5. Fremant CA	CA	9507/
Business phone: Street	City Representing:	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:			 _ Phone #:
Client Address:			
Street	City	State	Zip

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