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Date	THE CITY COUNCIL'S RUL	ES OF Council File	No., Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFO	RCED.	6762
I wish to speak before the	Public Safety	Ammittan ou Council	
	Name of City Agency, Department,	Committee or Council	
Do you wish to provide general p	oublic comment, or to speak for or aga	ainst a proposal on the ager	
Name: Fernando	Gengtan		Against proposal () General comments
Business or Organization Affiliati	on: LAPLA		
Address: \(\sum_{\text{Street}} \)	· Spa street city	+ CA	40015
Business phone? 13 645	Representing:	Ciaco	6-1p
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE (CLIENT INFORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

	A S DOWN COMPANY OF THE REAL PROPERTY OF THE REAL P		new of the trib on the of	014 1 0 0
Date /2/10/12	THE CITY COUNC		•	o., Agenda Item, or Case No.
, ,	Public Safets Name of City Agency, De	Comm	ittee	
	Name of City Agency,	spariment, Com	militee or Council	
Do you wish to provide general p	ARNOCO			(سنة) Against propõsal () General comments
Business or Organization Affiliati Address: Street	on: Los Angela	& Hans	less Services	Auth
Address: 811 Wilsh	ire Blos	LOS ANG	Nes CA	91607
Street Business phone: 213-683	-3333 Representing:	City O	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND P	ROVIDE CLIE	NT INFORMATION BELO	ow:
Client Name:		***************************************	F	Phone #:
Client Address:		City	State	7in

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Date 1スー10ー12	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 propos		da? () For proposal Against proposal General comments
Business or Organization Affiliation	on: PROPERTY OWNER		
Address: PGBox Street	24388 LOS ANGGAGE	CA Q State	<i>OOQU</i> Zip
Business phone: 3083	P15/6 Representing: Salar		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BE	LOW:
Client Name:			Phone #:
Client Address:	City	State	Zin

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Date 12-10-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Public SAFTIC Name of City Agency, Department, Committee or	ommittee Council
	oublic comment, or to speak for or against a proposa	
Name: JOHN W	HITAKER, CATCIL	() General comments
Business or Organization Affiliation	on: Paso Par Paso; SFV So	porliving Coalition
Address: PO BZ	X 93162 LA CA	90093-0162
Business phone: 213 40	10-6542 City SFU SLC	State Zip
	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 2-10-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File I	No., Agenda Item, or Case No.		
I wish to speak before the PUBLIC SAFETY COMMITTEE					
	Name of City Agency, Department, Committee or C	Council			
•	oublic comment, or to speak for or against a proposa		AC		
Name: PAVL DL	MONT- LA COUNTY:	3LC_	Against proposal () General comments		
Business or Organization Affiliati	on:				
Address:					
Street	City	State	Zip .		
Business phone:	Representing:				
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BE	LOW:		
Client Name:			Phone #:		
Client Address:					
Street	City	State	Zip		

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Date 12-10-12		OUNCIL'S RULES OF WILL BE ENFORCED.	1	o., Agenda Item, or Case No	
wish to speak before the		V Committee cy, Department, Committee	oo or Council		
Do you wish to provide general p				a? () For proposal (×) Against proposal	
Name: Jesse Lo:	•			() General commen	ts
Business or Organization Affiliati	on: Amity	foundation)		
Address: 3745 S. Gr	rand Ave	Los Angeles	Ca. State	9000 7 Zip	
Business phone: (213) 743-	<u> අර75</u> Represen	ıting:			
CHECK HERE IF YOU ARE A	A PAID SPEAKER A	ND PROVIDE CLIENT I	NFORMATION BEL	ow:	
Client Name:				Phone #:	
Client Address:		City	State	7in	

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Date 12-10-12	THE CITY COUNCIL DECORUM WILL B	1	Council File No., Ag	enda Item, or Case No.
I wish to speak before theP	Name of City Agency, Depart			
Do you wish to provide general Name: RACAEL RO		or or against a proposal o	on the agenda? () For proposal Against proposal) General comments
Business or Organization Affiliati	ion: Amity Fac	inDation		
Address: 3745 S.	Grand Aller	LOS Angeles	State	- Y000ラ Zip
Business phone (877)30/30/30/30/30/30/30/30/30/30/30/30/30/3	~		ATION BELOW:	
Client Name:			Phor	ne #:
Client Address:Street	C	Sity	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
12-10-12	DECORUM WILL BE ENFORCED.	L CCT	<u>0</u>
I wish to speak before the	uBlic Safety Comi	nittee	
	Name of City Agency, Department, Committee or	Council	
	public comment, or to speak for or against a propos	al on the agenda	?()For proposal () Against proposal
	narie CESarc		() General comments
Business or Organization Affiliati	on: Amity foundati	ON	
Address: 3745 9	b. Grand LA.	CA.	90007
Business phone: \\ \(\frac{877 - 307}{877 - 307} \)	Citv	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:		**************************************	
Street	City	State	Zîp

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Date 10:10	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	20 01	uncil File No., Ager	nda Item, or Case No.
I wish to speak before the Nan	Sasay Commented Sasay Comment, Department,	Committee or Counc	·	
Do you wish to provide general public Name: John Alden	· · · · · · · · · · · · · · · · ·			For proposal Against proposal General comments
Business or Organization Affiliation:	mity foundation			
Address: 3745 Street	d'Ave Les Ar	izcles c	A State	90007 Zip
Business phone: <u>1877-301-07</u>	FF Representing:			
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE	CLIENT INFORMATI	ON BELOW:	
Client Name:			Phone	#:
Client Address: Street	City		State	Zip



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Date /2/10/12	1	COUNCIL'S RULES OF WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the		ercy committee ency, Department, Committee	ee or Council	
Do you wish to provide general p Name: Brandon Fre	ederick		oposal on the agenda	? () For proposal () Against proposal () General comments
Business or Organization Affiliati				
Address: <u>3745 S. Gr</u> Street	and Ave	Los Angeles City	CA State	<i>90007</i> Zip
Business phone: عربة 3 -3 -3 -3 -0 -0 -	85 Repres	senting:		j-
CHECK HERE IF YOU ARE	PAID SPEAKER	AND PROVIDE CLIENT I	NFORMATION BELO	ow:
Client Name:			F	hone #:
Client Address:				
Street		City	State	Zip



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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

		_		
Date	THE CITY COUNCIL'	S RULES OF	Council File N	lo., Agenda Item, or Case No.
12-10-12	DECORUM WILL BE	ENFORCED.	CCF	<u>ک</u>
I wish to speak before the	Public Safet	Y COMM,	118	
,	Name of City Agency, Depart	tment, Committee or C	ouncil	
Do you wish to provide general p	oublic comment, or to speak for	r or against a proposal	on the agend	a?()For proposal (一Against proposal ()General comments
		7		() denotal comments
Business or Organization Affiliation	on: AMIXI T	DUNDATI	ON	
Address: 3745 Street	/	A	State	90007
Business phone: 2/3 743	2075 Representing:	,		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PRO	VIDE CLIENT INFOR	MATION BEL	.ow:
Client Name:				Phone #:
Client Address:	City	/	State	Zip

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	,						
Date 12/10/12	·	CIL'S RULES OF BE ENFORCED.	Council File No., A	Agenda Item, or Case No.			
I wish to speak before the PSC Name of City Agency, Department, Committee or Council							
Do you wish to provide general լ	oublic comment, or to spea	ak for or against a propo	sal on the agenda?	() For proposal			
Name: STAN G				(X) Against proposal () General comments			
Business or Organization Affiliati	on: TARZANA	TREATMEN	UT Cente				
Address: 18646 0X Street Business phone: 8(6 996~	nzrø 51	TAREARA	C↑ State	9/356			
Business phone: 816 996	//5/ Representing:	TARZOND	TREATME	, J Censer			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND I	PROVIDE CLIENT INF	ORMATION BELOV	v:			
Client Name:			Pho	one #:			
Client Address:	······································						
Street		City	State	Zip			

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Date	THE CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.		
12/10/12	DECORUM WILL BE ENFORCED.				
		<u> </u>			
wish to speak before the					
	Name of City Agency, Department, Committee	ee or Council			
Do you wish to provide general p	oublic comment, or to speak for or against a pr	oposal on the agenda?			
Name: Lowell Jon	(25		() General comments		
Business or Organization Affiliation: Amity foundation Address: 3750 So. GRAND Ave. LR Ca. 90007 Street City State Zip					
Address: <u>3750 So.</u> (SRANd Ave. LA	Ca:	90007		
Street	City	State	Zip		
Business phone: 2/3-/93	-9013 Representing: THE OR	1 / MRO/E			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		Ph	one #:		
Client Address:					
Street	City	State	Zip		

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Date 12-10-12	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	LO 01	File No., Agenda Item, or Case No.
I wish to speak before the			
	Name of City Agency, Department,	Committee or Council	
Name: Perer C	oublic comment, or to speak for or aga		(A Against proposal () General comments
	1	122-1	
Business or Organization Affiliati	on: 17mity 1-but	DHITON	
Address: <u>3745 S.</u>	GRAND AVE. LO	s Angeles	CA. 90007
Business phone (677) 301 -	on: Amity Found GRAND AVE. LO City O785 Representing: MEN;	WOMEN ON	PAROLE
	A PAID SPEAKER AND PROVIDE		
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip



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Date (2012	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No).
I wish to speak before the	Whic Sofety Committee		
·	Name of City Agency, Department, Committee	ee or Council	
Name: Grea Spicard	oublic comment, or to speak for or against a pro	oposal on the agenda? () For proposal (X) Against proposal () General commen	
Business or Organization Affiliati	on: Inn Cit, Law Center		
Address: 1909 E. Sev	enth St., L.A.	CA 90021	
Business phone: (3/3/89) -	Representing: Low - Troom	State Zip	***************************************
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:	
Client Name:		Phone #:	
Client Address:			
Street	City	State Zip	

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
12/10/10	DECORUM WILL BE ENFORCED.	11-0262
I wish to speak before the $\frac{\rho}{2}$	dic Safety Committee	
	Name of City Agency, Department, Committee	or Council
Do you wish to provide general p Name: <u>Alisa Ordun</u> e	public comment, or to speak for or against a propo	osal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliati	ion: United 12) ay OF (mealing Le	s Angeles
Address: 1150 S.OU	ne Stut-Sule I-500, los An	July (1 90015
Business phone: $(213)808$	-(eS20_ Representing: DYNLeiLWay a	breila CA
	YOU NEED TO SPEAKER AND PROVIDE CLIENT INF	'
Client Name:		Phone #:
Client Address:	City	State Zin
Client Address:Street	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFORCED.	11-036	<i>y</i> 2
I wish to speak before the	phic Salety Committee		
	Name of City Agency, Department, Committee or 0	Council	
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	I on the agenda	a? () For proposal
Name: Andrew Bolt	Berk		(X) Against proposal () General comments
Business or Organization Affiliati	on: Disability Rights California		
Address: 350 S. B	ixel, los Angels	(⁷ ∕}_ State	90017
	SOUO Representing: Disability Aight		
	PAID SPEAKER AND PROVIDE CLIENT INFOF		ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFORCED.	11-026	2
I wish to speak before the	stice Salety Committee		
•	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 propo	sal on the agenda?	() For proposal () Against proposal () General comments
	on: Disability Rights of Californ	(a	
Address: 350 S. B. Xel			7).
Business phone: (213) 213-9	3000 Representing: Drsably light		Zip
	PAID SPEAKER AND PROVIDE CLIENT INFO	*	w:
Client Name:		P(none #:
Client Address:			
Street	City	State	Zíp

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Date ,	THE CITY COUNCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFORCED.		1-11-0266
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 propos	al on the agend	a? () For proposal () Against proposal
Name:Stev	e Dia Z		() General comments
Business or Organization Affiliation	on: LACON		
Address: 53	OS. May St	1 A (CA EUUB
Street Business phone: 203-2.29	City	Stafe	Zip
,	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Olichit (vallie,			THOREW #.
Client Address:	City	State	Zip
Oneor	Orty	Clate	ب ب

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 12/10/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Council File No., Agenda Item, or Case No.	
I wish to speak before the	PVBLIC SAFETY (Name of City Agency, Departme	19 MMITE C nt, Committee or Co		
Name:CASSANDA	_		on the agenda	A? (X) For proposal () Against proposal () General comments
	ion: LAVREL CAN		CA	90046
Business phone: 323 65	RIDPATH DR. City Representing: L	CA IN C	State D 4	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE	E CLIENT INFORM	ATION BEL	ow:
Client Name:			[Phone #:
Client Address:	City	**************************************	State	Zip

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Date / 2 - / 0 - / 2		OUNCIL'S RULES WILL BE ENFORG	· (ncil File No., Agen	da Item, or Case No.
I wish to speak before the			DUMITHEE ommittee or Council		COUNCIL
Do you wish to provide general Name:			nst a proposal on the	agenda?	For proposal Against proposal General comments
Business or Organization Affiliat	ion: WESTW	OOD SOUT			
Address:	0. Bix 4	94213 City		A CA	900ky Zip
Business phone:	Represen	ting:			
CHECK HERE IF YOU ARE			LIENT INFORMATIO	N BELOW:	
Client Name:				Phone	#:
Client Address:Street		City	SI	ate	Žip

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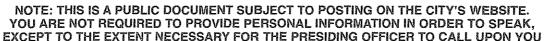
Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
13/10/12	DECORUM WILL BE ENFORCED.	#11-0362	•
I wish to speak before the	Name of City Agency, Department, Committee		situ suggestions.
ا مد	public comment, or to speak for or against a prop	osal on the agenda	? (X) For proposal () Against proposal
Name: Maria Fisk			() General comments
Business or Organization Affiliati	on: Old Granda 14 11s Residents	" Croups Grl	11/15 South NS
Address: Granda	11,11s		pre u vies
Street	City	State	Zip
Business phone:	Representing:	·····	
	A PAID SPEAKER AND PROVIDE CLIENT IN		
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY (COUNCIL'S RULES OF		Agenda Item, or Case No.
14/0/12	DECORUM	WILL BE ENFORCED.	11-026	2_
I wish to speak before the	BUC SOFET	y Colon 27 zi		
•	Name of City Age	ncy, Department, Committee	or Council	
Do you wish to provide general Name:	^		oosal on the agenda?	For proposal () Against proposal () General comments
Name: SETHER JE	-1500667		UEST/ 1000 A	21112-1400
Business or Organization Affilia	tion: WESTLO	OB HOW BOWNS	es Associa	ROW COUNCE
Address: P.O.Jos.	241936	LA	<u>Olg</u> State	20024
Business phone:	Represe	nting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:			Ph	none #:
Client Address:				
Street		Citv	State	Zip

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Date Z - 10 - 1 Z	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	blic Safely Committee	0
	Name of City Agency, Department, Committee or	
Name: Edward	public comment, or to speak for or against a proposition	() General comments
Business or Organization Affiliation	on: Granada Hilly Worth 1	VC
Address: 11139 Wax	lley Avenue , Granada	Hills, CA 91344
Business phone: 8 720-	18 Representing: GHNNC	State Zip
	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip



Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
DEC, 10,2012	DECORUM WILL BE ENFORCED.		
I wish to speak before the PU	BLIC SAFTEY COMMIT	TEE	
	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	For proposal Against proposal
Name: DONALD KEL	LER		General comments
, Business or Organization Affiliation	On: HILLSIDE FEDERATION, WER AVE L.A. CA 9 &	BRENT	WEED HOA
Address: \$08 N, KE	MER AVE WA, CA TO	0049	
Street Rusiness phone: 310 - 1473	City 5777 Representing: 5806	State	Zip
•	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELL	OW:
Officer Herical Too Are A	TAB OF LARLIT ARD FROVIDE OFFICER MICO	IMATION DEL	O ***.
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip



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Date	THE CITY COUN	ICIL'S RULES OF	Council File I	No., Agenda Item, or Case No.
12/10/2012		BE ENFORCED.		
2/10/20,2			<u></u>	· F
I wish to speak before the	UBLIC SAFETY			
·	Name of City Agency, D	epartment, Committee o	r Council	
Do you wish to provide general p		ak for or against a propos	sal on the agenc	la? んん For proposal () Against proposal
Name: DAVID GI	HAFINHLE _			General comments
		Pana		1 car com com
Business or Organization Affiliati	on: / / (#/ \ #/ \ #/ \	r Tropery	SW NIEKS	#HUCC MITTON
Address: 6078 Street Business phone: 8/8 88/-	CALVIN AVE	TARZAM	CA	91358
Street		City	State	Zip
Business phone: 6/8 88/ -	6318 Representing:	THRZAND PROPERT	Y OWNERS	ASSOCIATION
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CHECK HERE IF YOU ARE A	PAID SPEAKER AND	PROVIDE CLIENT INFO	DRMATION BEI	_OW:
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Client Name:		**************************************		Phone #:
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Client Address:Street		City	State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

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Date	THE CITY	COUNCIL'S RULES OF	1	No., Agenda Item, or Case No.
12/10/12	DECORUM	I WILL BE ENFORCED.	11-	0262
I wish to speak before the	Iblic S.	afety Con	witee	
•	Name of City Age	ncy, Department, Commit	tee or Council wi tighten ma	suggestions
Do you wish to provide general pu				la? 🕊 For proposal
Name: JANE 5	HAY L	UALD		() Against proposal () General comments
Business or Organization Affiliation):			
Address:	205	ANGEL	ES CA	90069
Address: Business phone: 3 10 923-	8555 Frese	City enting:	State	Zip
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Client Name:				Phone #:
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Street		City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case	e No.
12/10/12	DECORUM WILL BE ENFORCED.		
I wish to speak before theNan	ne of City Agency, Department, Committee	ee or Council	***************************************
Do you wish to provide general public	comment, or to speak for or against a pr	oposal on the agenda? () For proposal () Against propo	osal
Name: /// // // // // // // // // // // // /	MOMM	() General com	
Business or Organization Affiliation: <u>/</u>	NORTHAIDER W	GY come of	VCI
Address: 19/00 2/6	OUT SI WORT	THRIDIF, CA 9	152
Street	City	State / Zip	
Business phone:	Representing:		***************************************
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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 12/10/2012	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	PUBLIC SAFET Name of City Agency, Department Committee	
Do you wish to provide general p	public comment, or to speak for or against a prop	() Against proposal
Business or Organization Affiliati		CA 90046
Business phone: 213 999	VISTA ST LA City PARTA 6463 Representing: HOMEOW	State Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
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Client Address:	City	State Zip

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Date /え//0//2 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Public Safety Committee of Name of City Agency, Department, Committee of City Agency, Committee of City Agency, Department, Committee of City Agency, Department, Committee of City Agency, City Ag	# 11-036.	., Agenda Item, or Case No.
Do you wish to provide general posterior Name: SHARON C	oublic comment, or to speak for or against a propo	sal on the agenda	? For proposal () Against proposal () General comments
Business or Organization Affiliation	on: MAR VISTA COMMUNITY	Couper	-
Address:	City	State	Zip
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Client Name:			Phone #:
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Date 12-10-20/2	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
12-10-2012	DECORUM WILL BE ENFORCED.	11-0262
I wish to speak before the	blic SAFety Committee	Agenda # 1
·	Name of City Agency, Department, Committee or	Council
Name . TART TURA	oublic comment, or to speak for or against a proposa <i>ER - PRESIDENT E MERI</i>	() Against proposal () General comments
Business or Organization Affiliati	on: PACIFIC PAlisAdes Communito	y Council + WRAC
Address: 651 LAch	on: Pacific Palisades Communito West side Regional Allia MAN LANE City	AllsAdes CA 90272
Street Business phone: 3/6-573	$3-0382$ Representing: $PCC ext{ } $	State Zip URAC
· ·	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
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Date 12/10/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	. 11-0	genda Item, or Case No. 7 262
I wish to speak before the	PUBLIC SAFETY	ComMITTEE	
·	Name of City Agency, Department, Comn	nittee or Council	
	public comment, or to speak for or against a	proposal on the agenda?) Against proposai
Name: 5/6	VE WIN O	·····) General comments
Business or Organization Affiliati	ion: WRAC-BABC	NC-HILLS	100/00
Address: 1535 K	OSCOMARE RD City	LA	90077
Street	City	State	Zip
Business phone:	Representing:		
·	A PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELOW	·:
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Street	City	State	<i>7</i> in

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Date 12/10/12 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee	11 02	Agenda Item, or Case No.
Do you wish to provide general	public comment, or to speak for or against a pro-	oposal on the agenda?	() For proposal () Against proposal
Name: Keb	ecca LoBe.		() General comments
Business or Organization Affiliati	ecca La Coalita	n for Ne	phonhoo
Address:Street			
	Representing:	State	Zip
·	A PAID SPEAKER AND PROVIDE CLIENT I		w: []
Client Name:		Ph	one #:
Client Address:	City	State	Zip
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Date 12/10/12	THE CITY COUN DECORUM WILL		Council File No	., Agenda Item, or Case No. 262
I wish to speak before the	Public and St Name of City Agency, De	af <i>ety Comment</i> epartment, Committee	Acei or Council	
Do you wish to provide general Name:		k for or against a prop	osal on the agenda	? () For proposal (ArAgainst proposal (L) General comments
Business or Organization Affiliati	ion: 1736 Fame			22 - 12
Address: 216 Ar. Street Business phone: 316 - 543 - 91	100 YW8 Representing	City 17.36 FCC	CA State	90018 Zip
CHECK HERE IF YOU ARE			ORMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:Street		City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File	No., Agenda Item, or Case No.
12/9/10/12	DECORUM WILL BE ENFORCED.	11-0	262
I wish to speak before the	uc solely Comment	ee	
•	lame of City Agency, Department, Committee or C	Council	
D	lia commani auto anople for au aucinat a numana	l th	den () For proposal
	lic comment, or to speak for or against a proposa	_	() Against proposal
Name: EVE Sheedy	- Domerne Violen		(X) General comments
Business or Organization Affiliation:	Los Angeles 55 Task For	ce	
Address: Street	City	State	Zip
	20 Representing: LA DV Task	FRICA	درب
CHECK HERE IF YOU ARE A P.	AID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BE	LOW:
Client Name:			Phone #:
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Olleet	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File N	lo., Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFORCED.	***************************************	1
I wish to speak before the	Public Safety Committee Name of City Agency, Department, Committee or		
•	Name of City Agency, Department, Committee or	Council	
	oublic comment, or to speak for or against a propose	al on the agend	() Against proposal
Name: Mayen/z Van			(✓ General comments
Business or Organization Affiliati	on: <u>Sojam Service For Baffered Wo</u>	men And Th	eir Childen
	Sanfa Monica City		
Business phone: (3(0) 264-6	646 Representing: DV victius / she	Hevs	ZIP
	A PAID SPEAKER AND PROVIDE CLIENT INFO		.ow:
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Date 12	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCE	* .	No., Agenda Item, or Case No.		
I wish to speak before the	26010	onte	1 uo com		
·	Name of City Agency, Department, Com				
Do you wish to provide general p	public comment, or to speak for or against		(\ Appinet proposal		
Name:	DrTonell	MIGMS	General comments		
Business or Organization Affiliation	on: LA3	2NC			
Address:Street		LA	90032		
	City Representing:	LUD En	ite Char		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
Public Safety Committee		
Name of City Agency, Department, Committee	ee or Council	
	roposal on the agenda?	For proposal Against proposal General comments
A. Us Angelei	CA	90024
891 3248 Representing:	State	Zip
	INFORMATION BELO	w: []
	Ph	none #:
City	State	Zip
	DECORUM WILL BE ENFORCED. Public Safety Committee Name of City Agency, Department, Committee public comment, or to speak for or against a proposed of the comment of the	DECORUM WILL BE ENFORCED. Public Safety Committee Name of City Agency, Department, Committee or Council public comment, or to speak for or against a proposal on the agenda? And D Son: In new City Law Center State City State A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW Pr

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Date 12-10-12	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE	'U'	o., Agenda Item, or Case No.		
I wish to speak before the PUBLIC SAFETY COMMITTEE					
	Name of City Agency, Department, Co	ommittee or Council			
Do you wish to provide general p	public comment, or to speak for or again	ist a proposal on the agenda	a?()For proposal Against proposal		
Name: Hanna Dershows	t3		() General comments		
Business or Organization Affiliati	ion: ACLU		***************************************		
Address: 1313 W. 84 St.	6A	CA	90017		
Street	City	State	Zip		
Business phone: 213.973.	5208 Representing: ACKU+L	ALLO			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:		**************************************	Phone #:		
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Date 12 - 10 - 12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the	Public Safety Commuttee Name of City Agency, Department, Committee or C	Council	
Name: GIRI SZ	oublic comment, or to speak for or against a proposa		da? () For proposal () Against proposal () General comments
Business or Organization Affiliati	on: New Pinections, Inc.		
Address: 1/303 W	rushine Blvd., Los Ángeles	State	9W73 zip
Business phone: 310-914-	- ¹ /0 45 Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BE	LOW:
Client Name:			Phone #:
Client Address:	City	State	Zip



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Date 10/12	THE CITY COUNCIL'S DECORUM WILL BE E		Council File No	., Agenda Item, or Case No.	
I wish to speak before the	Public Safely	Com			
Do you wish to provide general p	Name of City Agency, Departmoublic comment, or to speak for c			? () For proposal Against proposal	
Name: AMME	Margy t	Colonsol		() General comments	
Business or Organization Affiliation Address:	ordmore los	Angles			
Street Business phone: 218-385-2			State	Zip	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:			F	Phone #:	
Client Address:	City		State	Zip	

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Date 2-10-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	genda Item, or Case No.
I wish to speak before the	UBUC SAFETY (SMMITTE.	Ę
	Name of City Agency, Department, Committee	or Council	
111. 100	ublic comment, or to speak for or against a prop	oosal on the agenda? (Against proposal
Name: ////		() General comments
Business or Organization Affiliatio	in: The Midnight M	155160	
Address: 601 S.	and Pedro St	LA (A	90014
Business phone: 310643	City Representing:	State	Zip
	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW	
Client Name:		Phor	ne #:
Client Address:	City	State	Zip

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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Public Sufely	
Name of City Agency, Department, Committee or Co	puncil
Do you wish to provide general public comment, or to speak for or against a proposal o	on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation: Transcend Soher 1826/19	
Address: 8200 wilshive ave CTA	CA 90036
Street City	State Zip
Business phone: Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORM	IATION BELOW:
Client Name:	Phone #:
Client Address:	State Zip



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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 12/10/2012	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	_	o., Agenda Item, or Case No. 0262
I wish to speak before the	Name of City Agency, Department, Committee or	Council	
Do you wish to provide genera	al public comment, or to speak for or against a propos	al on the agenda	? () For proposal
Name:	PAUL DUMONT		(b) Against proposal (c) General comments
Business or Organization Affilia	ation:		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:	V.,,,,	
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Date 12/10/13	THE CITY COUND		Council File No	., Agenda Item, or Case No.	
I wish to speak before the	VBLIC SAFETY (Ah	SAM TOWN #1	
	Name of City Agency, De	epartment, Committee or (Council		
Do you wish to provide general p	00V			(%) Against proposal () General comments	
Business or Organization Affiliation Address: 2937 5. 11 Street Business phone:	on: SHARE! / WE	ST ADDING YELLOWS	naken As	SOCIANON JUNIU	
Address: 2937 5. /1	Mizumas Blub.	Less Anecres	CA	<u> 20018</u>	
Business phone:	Representing:	SHAZEI/WA	WA State	Zīp	
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Date 12-10-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	, Agenda Item, or Case No.
I wish to speak before the	PUBLIC SAFETY CO	SMM/TTE	£
- the second sec	Name of City Agency, Department, Committee		O () For proposal
Do you wish to provide general p	oublic comment, or to speak for or against a prop	osal on the agenda	?()For proposal ★)Against proposal
Name: JEFF CHR	istensien		() General comments
	on: SOBER GVING NG	TWORK	
Address: P.O. Box	5235 SANTA MONICA	CA	90409
Business phone: 310)925	1-7155 Representing:	State	Zip '
,	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELC	ow:
Client Name:		P	hone #:
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Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
12-10-12	DECORUM WILL BE ENFORCED.		
I wish to speak before the	Health & Saft		
•	Name of City Agency, Department, Committee or	Council	
	oublic comment, or to speak for or against a propos	al on the agenda	?()For proposal ()Against proposal
Name: <u>Chancel</u>	a AV-Mansour		() General comments
Business or Organization Affiliation	on: HOUSING RIGHTS CO	rter	
Address: 3255	& Wilshire Bud (A G)	9004	
Street Business phone: 243387-84	· · · · · · · · · · · · · · · · · · ·	State	Zip
	PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELO	w:
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Date 12/10/18	THE CITY COUNCIL DECORUM WILL BE		Council File No.,	Agenda Item, or Case No.
I wish to speak before the	blic Dafate	T Comm		
,	Name of City Agency, Depa	tment, Committee or (Council	
Do you wish to provide general p	public comment, or to speak for	or or against a proposa	I on the agenda?	() For proposal
	51 +	. ,	~	() Against proposal
Name: 1994	Olcus Ru	<u> </u>		() General comments
Business or Organization Affiliation	on: anctor	Foundel	in	
Address: 3745	So Grand	All a	ACC	9008
Business phone: 213 743	39077 _{Representing:}	ity	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PRO	OVIDE CLIENT INFOR	RMATION BELOV	v:
Client Name:			Pho	one #:
Client Address:			•	
Street	C	itv	State	Zip

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EXCEPT TO II	HE EXIENT NECESSARY FOR THE PRESIDING	OFFICER TO CALL OF	PON YOU	
Date 12/10/12	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	Public Safety Committee Name of City Agency, Department, Committee			
Do you wish to provide general p	oublic comment, or to speak for or against a p	proposal on the agend	a? () For proposal	veal
Name: Lynne Ly	man		() General comm	nents
Business or Organization Affiliation	on: Doug Policy Allianc	ce, Los Angel	is Regional K Partners	rent up
Address: Street	City	State	Zip	
Business phone: (213)210-10	Pepresenting:			-
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Client Name:			Phone #:	
Client Address:	City	State	Zip	·

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Date \$2/10/2012	THE CITY COUNCIL'S RULES OF		o., Agenda Item, or Case No.
\$2/10/2012	DECORUM WILL BE ENFORCED.	<u> 11 - </u>	0262
I wish to speak before theP	UBIC SAFETY COMMITTEE		
	Name of City Agency, Department, Committee or C	Council	
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	I on the agenda	? () For proposal
Name: DARY CHAVEZ			(Against proposal (General comments
Business or Organization Affiliati	on: INNER CITY Upw Couters.		
Address: 1369 E. 744	STREET, LOS ANGREES, CA	<u> </u>	10021
	City 1 - 2980 Representing: NRL WM LA		Zip
·			
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOF	RMATION BEL	OW:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip



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Date /2/10/12	THE CITY COUNCIL'S RULES (DECORUM WILL BE ENFORCE	11 /	o., Agenda Item, or Case No.
I wish to speak before the	rublic Safety Comm	rittee	
	Name of City Agency, Department, Cor	nmittee or Council	
Name: AYAKA MI Business or Organization Affiliati	/	Partai	? () For proposal (X) Against proposal () General comments
Address: 1309 E ,)	7th Street	Los Angeles	1021
Street	324/ Representing: /nnev	City Law Cer	W Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BELO	ow:
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Client Address:			
Street	City	State	Zip



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Date	THE CITY COUNCIL'S RULES	OF Council File No	Agenda Item or Case No.
10 DEC., 2012	DECORUM WILL BE ENFORC	ED. 11-0262 9	10
I wish to speak before the	UNCIL PUBLIC SAFETY C		
	Name of City Agency, Department, Co	mmittee or Council	
Do you wish to provide general p Name: <u>RABEYA</u> SEN	oublic comment, or to speak for or agains		? () For proposal () Against proposal () General comments
Name. The A	0		•
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Rusiness phone:	Representing:	·	
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Date Date	THE CITY COUNCIL'S RULES OF	Council File No:, Age	nda Item, or Case No.
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Nan	ne 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?) For proposal ⊵ Against proposal
Name:	Drion Wi	Wants 0	General comments
Business or Organization Affiliation:	LA32	NC	
Address:	LA	90032	
Street	City	State	Zip
Business phone:	Representing:	Dar-	
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Client Name:		Phone	» #:
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Date /2/10 /2 I wish to speak before the	e Name of City Agency, De		11-0262.	enda Item, or Case No.
Name: VMW T		for or against a proposal	(e-) For proposal) Against proposal) General comments
Business or Organization	. 1	1 A	aan Isc	
Address: 4003 Ad		City	State	Zip
Business phone: 325	<u> 766-2413</u> Representing: _			
	ARE A PAID SPEAKER AND P	ROVIDE CLIENT INFORT	MATION BELOW:	
Client Name:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Phone	e #:
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Date	THE CITY COUNCIL'S RULES O	Council File No.,	Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFORCED). [1/11-	- 0262
I wish to speak before the	Public Safety Commit	#	
•	Name of City Agency, Department, Comr	mittee or Council	
•	oublic comment, or to speak for or against a		() For proposal (> Against proposal
Name: <u>Yeahia K</u>	reshishian		() General comments
Business or Organization Affiliati	on: Central City A	ssociation	
•	J	•	
Address:Street	City	State	Zip
Business phone:	Representing:		
•	A PAID SPEAKER AND PROVIDE CLIEN		
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Date 12/10/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the	Pub Safety Committee Name of City Agendy, Department, Commit		
	public comment, or to speak for or against a p	proposal on the agenda	?()For proposal (刈)Against proposal
Name: Sharon Ra	port		() General comments
Business or Organization Affiliati	ion: Corp for Summortive A	ousing	
Address: 800 S Street	Jameroa 310 LA	CA	90017
Business phone: (\mathcal{L}_{3}) 62	City 234342—Representing: C514	State	Zip
•	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	ow:
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Date 12/10/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or	Council	
Name: David Hou	oublic comment, or to speak for or against a propos		() For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Corp for Supportive Hou	SVG	
Address: 800 S Fig	veroa Ste 810 LA	State	900/7 Zip
Business phone: $(2(3))623$	4342 Representing:		
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Business phone:	Representing:			
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Client Name:		F	hone #:	
Client Address:	City	State	Zip	
Please see reverse of card f	or important information and submit this entire card t	to the presiding o	officer or chairperson.	<u>.</u>

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	Name of City Agency, Department, Committee	or Council			
	public comment, or to speak for or against a propo		Against proposal () General comments		
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Date 2 - 12 - 12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	No., Agenda Item, or Case No.	
I wish to speak before the	UBLIC SAFAY LONG	SITTE		
	Name of City Agency, Department, Committee or	Council		
Name: MARLEY			la? () For proposal Against proposal () General comment	s
Business or Organization Amilian	ion:			
Address:Street	City	State	Zip	
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I wish to speak before the	toblic Satety Co	mmitt	ee
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Name:	1 Rendell		() General comments
Business or Organization Affiliati	on:		
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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
12/10/12	DECORUM WILL BE ENFORCED.	11-0262 #/
I wish to speak before the	Ochra Polic Safet	Comier
	Name of City Agency, Department, Committee	
Do you wish to provide general p	public comment, or to speak for or against a pr	oposal on the agenda? () For proposal () Against proposal
Name: Eva Casas		() General comments
Business or Organization Affiliation	on: Disability Rights Ca	lojornia
	Street, Santa Ana CA	
Business phone: (636) 623	•	State ZIP
	PAID SPEAKER AND PROVIDE CLIENT I	INFORMATION BELOW:
Client Name:		Phone #:
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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 FL	ED BROWN RECOVERY	SERVICES	
The state of the s	lame of City Agency, Department, Committee of	r Council	
Do you wish to provide general pub Name: <u>ED</u> SIGLE	lic comment, or to speak for or against a propo	sal on the agenda?	() For proposal (Against proposal () General comments
Business or Organization Affiliation:	SUPERVISOR		
Address: 270 W.	14th ST. SAN PE	DRU CA.	90501
Street Business phone: 310 519 8	14 Fb ST. SAN PE 123 Representing: FBRB	State	Zip
	AID SPEAKER AND PROVIDE CLIENT INF		l l
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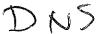
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Name: <u>Jesus</u> R	Pubalcava	**************************************	() General comments
Business or Organization Affiliati	on:	- William Control of the Control of	
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