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Date		THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.	
2 25	2013	DECORUM WILL BE ENFORCED.		£ 2	
I wish to speak be	fore the	ad Hor River Commette	عي العام	11-1403	
		Name of City Agency, Department, Committee of	or Council		
, ,		oublic comment, or to speak for or against a propo	sal on the agenda	? () For proposal () Against proposal () General comments	
ivanie. 1100					
Business or Orgar	nization Affiliati	on:			
Address:					
		City	State	Zip	
Business phone:	<u>323 31</u>	<u>1-343</u> ₽Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
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.

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Name: Andra	Vintura			() Against () Genera	t proposal Il comments
Business or Organization Affilia	ation: <u>Résiden</u>				
Address: Chris	4 Chase Prove	<u> </u>	<u> </u>	° 9	
Street Business phone: (323)43	Representi	ing: <u>On Valaria</u>	Stat	e Zip どんちっこか	
CHECK HERE IF YOU ARE	A PAID SPEAKER AN	ID PROVIDE CLIE	NT INFORMATION	BELOW:	
Client Name:	•			Phone #:	
Client Address:					
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Date 2-25-/3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
		11-146	22
I wish to speak before the $\underline{\hspace{1cm}}$	d Hoc River Comme		
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	n: Friends of Griffith		
Address:Street		State	
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CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW	<i>t</i> :
Client Name:		Pho	one #:
Client Address: Street	City	State	Zip

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Date 2.25./3		ICIL'S RULES OF BE ENFORCED.	Council File No	o., Agenda item, or Case No.
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Do you wish to provide general p		ak for or against a	proposal on the agenda	? () For proposal (나) Against proposal
Name: KELLY BL	MPED			(4) General comments
Business or Organization Affiliati		JT		
Address: 4001 V	EZIOHNIT ST.	LA	CA	70033
Business phone: 41 6. 63		City	State	Zip
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City

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

Client Name:

Client Address:

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Address: Street	V	
Street Street Business phone : <u>273-771-7960</u>		State Zip
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Client Name:		Phone #:
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Date



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Name of City A	Agency, Department, Comn	nittee or Council	
Do you wish to provide general public comment, o	or to speak for or against a	proposal on the agenda?	
Name: KARIN FLORES			() Against proposal (>) General comments
Business or Organization Affiliation: FRIE	i	•	the state of the s
Address: 570 W AVEN	10日 26 井	250 LAC	IN 90065
Street Business phone: <u>323 223 0585</u> Repr	City resenting:	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKE	R AND PROVIDE CLIEN	T INFORMATION BELOW	v:
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