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Date /	THE CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
7/24/17	DECORUM WILL BE ENFORCED.	11/11/21-61	#5
I wish to speak before the	# 5		
, with to opean sole and	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a pro	posal on the agenda?	() For proposal
Nama: MILLIATI	2 CAPREON		() Against proposal () General comments
Name.			
Business or Organization Affiliati	on:		
A 4.1			
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELO	W:
Client Name:		Ph	none #:
Client Address:Street	City	State	7io
Street	Oity	State	Zip

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7/24/12	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	Councel			
Náme	of City Agency, Department, Committee o	r Council		
Name: Dan Duncan	omment, or to speak for or against a propos	·	() Against proposal () General comments	
Business or Organization Affiliation:	mericans for Sufe	1ttcces	<u> </u>	
Address: D/54, /3	LA	CA	90026	
Street 3233266347		State	Zip	
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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Date	THE CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
July 24, 2012	DECORUM WILL BE ENFORCED.	#5	Medical
			Cannabi-
I wish to speak before the		CITO	2001018090
Na	me of City Agency, Department, Commi	ttee or Council	
Do you wish to provide general public	comment, or to speak for or against a	proposal on the agenda?	() For proposal
Name: 5vsam	O'leary		() Against proposal () General comments
Business or Organization Affiliation:	NONE.		
Address: LA (A 90012		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	W:
Client Name:	X	Pl	none #:
Client Address:			
Street Street	City	State	Zip

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	20211101		THE STATE OF THE	
Date 7	1)	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	enda Item, or Case No.
wish to speak be	efore the	J		
•		Name of City Agency, Department, Committee		
Do you wish to pr	rovide general p	oublic comment, or to speak for or against a pro	posal on the agenda? () Against proposal
Name:		VETT JOUR) General comments
J		on:/		
Address:	Street	City	State	Zip
Business phone:		Representing:		remaining.
CHECK HERE I	F YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:			Phor	ne #:
Client Address: _	Street	City	State	710
	Street	Oily	Siate	Zip

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Date	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					
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal Name:					
business of Organization Anniatio	711-	***************************************			
Address:Street	City	State	Zip		
	Representing:				
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:			Phone #:		
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1		
Date 24/12 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee or	Council File No., Agenda Item, or Case No.
	iblic comment, or to speak for or against a propos	
Name: <u>Carlos</u>	Kruschewsky	(X) Against proposal () General comments
Business or Organization Affiliation	n: ,	
	Watseka Ave #1	Los Apeglo 90036
Business phone:	Representing:	
	PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 7-24 I wish to speak bef		THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. MIKE GREA	Council File No.	., Agenda Item, or Case No.
		Name of City Agency, Department, Committee	or Council	
Do you wish to pro	vide general	public comment, or to speak for or against a prop	oosal on the agenda	() Against proposal
Name:				() General comments
Business or Organ	ization Affiliati	ion:		
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	Street	City	State	Zip
Business phone:		Representing:		**************************************
CHECK HERE IF	YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELC	ow:
Client Name:			P	hone #:
Client Address:	Street	City	State	Zip

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Date /	THE CITY COUNCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
7/24/12	DECORUM WILL BE ENFORCED.	1_5	
I wish to speak before the	City Cancol		
•	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 agenda	a? (>) For proposal () Against proposal () General comments
Business or Organization Affiliati			
Address: 346 5. C	Stess St Cos Angels,	CAA	·
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Name:			Phone #:
Client Address:	City	State	Zip



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

Date 7/24/12		OUNCIL'S RULES OF WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the		Counci /	or Council	
Do you wish to provide general Name:	· •		oosal on the agenda?	P () For proposal Against proposal () General comments
Business or Organization Affili Address: 4646	ation:			Donn
Address: TOTEL Street	es reliz	City	State	Zip
Business phone:	Represer	nting:		
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Client Name:			Pl	hone #:
Client Address:		City	State	Zip



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

Date 9-24-12	THE CITY COUNCIL'S REDECORUM WILL BE ENF		Council File No.,	Agenda Item, or Case No.
I wish to speak before the	City Come	· (_		
	Name of City Agency, Departme	nt, Committee or Co	ouncii	
	ral public comment, or to speak for or	against a proposal c	on the agenda?	() For proposal
Name: Ra	ufBarrios			Against proposal () General comments
Business or Organization Aff	iliation:			
Address:	Cons	Beach	CA	90917
Address:Street	City		State	Z ip
Business phone:	Representing:	***************************************	***************************************	***************************************
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDI	E CLIENT INFORM	TATION BELO	N:
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Client Address:	City		State	Zip
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Date	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.	
1/10/11/12	DECORUM WILL BE ENFORCED.		5	
I wish to speak before the	City Council			
	Name of City Agency, Department, Committee or	Douncil		
	public comment, or to speak for or against a proposa	I on the agenda?	? () For proposal () Against proposal	
Name: Kristin Fi	ndley		() General comments	
Business or Organization Affiliat	ion:			
Address:				
Address:Street	City	State	Zip	
Business phone:	Representing:		P	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
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Date	THE CITY COL	UNCIL'S RULES OF	Council File N	lo., Agenda Item, or Case No.
7-24-2012	DECORUM WI	LL BE ENFORCED.	Item	· *5
I wish to speak before the	A CITY	(ouncil	too or Courcil	
ľ	vame of City Agency,	, Department, Commi	tee or Council	
Do you wish to provide general pub Name: 1 Nov	francia			a? () For proposal () Against proposal () General comments
7 (1)		1011	······································	
Business or Organization Affiliation:	SUIT 1	((atrent)		
Business or Organization Affiliation: Address: 5 Street	an Podro	LA	CA	90014
Street		City	State	Zip /
Business phone:	Representir	ıg:		
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Client Address:				
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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 No., Agenda Item, or Case No.
7-24-12	DECORUM WILL BE ENFORCED.	#5
I wish to speak before the	A CITY COUNCIL	
	Name of City Agency, Department, Committee of	r Council
ا Do you wish to provide general	oublic comment, or to speak for or against a propo	
1.21	MMJ PATIENT	() Against proposal () General comments
Name:	MAZ MAICH	() deneral comments
Business or Organization Affiliati	on:	
Address 1850 Res	ston Aue	
Street	City	State Zip
Business phone 323 346 - 76	City S3 Representing:	
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CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
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Client Address: Street	City	State Zip
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JULY 24 /12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theN	CITY COUNCIL Iame of City Agency, Department, Committee o	r Council
	lic comment, or to speak for or against a propos	sal on the agenda? () For proposal
Name: MIKE	GRAY	(*X) Against proposal () General comments
Business or Organization Affiliation:	COMMON SENSE FOR	DRUG POLICY
Address: 8301 MA	RMONT IN. LOS ANGELY	5 CA 90069
Business phone: $323/650/7$	City ZIZ Representing: <u>SEL</u> 半(こ	HLIPHAN C.S. DP.)
ν (AID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:	City	State Zip



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

			" ((1))
Date 7-24-12	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	oo or Council	
	, , , , , , ,		
Do you wish to provide general p	oublic comment, or to speak for or against a pro	oposal on the agenda?	For proposal
Name: Michael	Larsen		Against proposal General comments
Business or Organization Affiliati	on: Eagle Rock N.C.		
	,		90041
Address:Street	Citv	State	7007
Business phone:	• •	State	

CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELO	w:
Client Name:		· P	none #:
Client Address:			
Street	City	State	Zip

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Date 7/24/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.		
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	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	_	(? () For proposal () Against proposal () General comments		
Business or Organization Affiliati	on:				
Address:Street					
Street	City	State	Zip		
Business phone:	Representing:				
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Date 7/24/12	-	CITY COUNCIL'S RULES OF ORUM WILL BE ENFORCED.		., Agenda Item, or Case No.
I wish to speak before t		Council	ita a a v Courait	
	general public comme	ty Agency, Department, Comm nt, or to speak for or against a	proposal on the agenda	? () For proposal Against proposal () General comments
Business or Organization	on Affiliation:			
Address:				90019
Address:Str	eet	City	State	Zip /
Business phone:	R	epresenting:		
CHECK HERE IF YO	U ARE A PAID SPEA	KER AND PROVIDE CLIEN	T INFORMATION BELO	ow:
Client Name:				Phone #:
Client Address:	eet	City	State	Zip

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Date	THE	CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
7/1/1		ORUM WILL BE ENFORCED.	1000	
1/27//2		Onom will be the onoeb.	Agenda I	Hem 5
I wish to speak before	the <u>City</u>	Council		
	Name of C	ity Agency, Department, Committe	e or Council	
Do you wish to provide	e general public comme	ent, or to speak for or against a pro	posal on the agenda?	() For proposal () Against proposal () General comments
Name: / 10(1 100)	V) (J177>>			() General Comments
Business or Organizat	ion Affiliation:			
Address:		L.A.	CA	900 19
S	treet	City	State	Zip
Business phone:	F	Representing:		
·		AKER AND PROVIDE CLIENT II	NFORMATION BELO	w:
Client Name:			Ph	none #:
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Date 7-24-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.	
I wish to speak before the	City Councel			
	Name of City Agency, Department, Committee or	Council		
Name: Caby L	public comment, or to speak for or against a propose OPC 7 ion:		? () For proposal Against proposal () General comments	
J			91763	
Address:Street	City	State	Zip	
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CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
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Date	THE CITY COUNCIL'S RULES OF	Council File I	No., Agenda Item, or Case No.
7-24-12	DECORUM WILL BE ENFORCED.		5
I wish to speak before the	City Bearest		
•	Name of City Agency, Department, Committee or	Council	,
Do you wish to provide general p	oublic comment, or to speak for or against a propose	al on the agenc	la? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	rmation bei	
Client Name:			Phone #:
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Date	THE CITY COUNCIL'S RULES OF	Council File	No., Agenda Item, or Case No.
7-24-12	DECORUM WILL BE ENFORCED.	# 4	
I wish to speak before the	liter Councel		
	Name of City Agency, Department, Committee of	r Council	
Do you wish to provide general p. Name: AUBERT D.	oublic comment, or to speak for or against a propos	sal on the agen	da? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: NEW AGE CCC		
Address: 19720 \ Lw	tura Blod. WoonLAND HILLS,	CA	91364
Street Business phone: (9/8) 481-8	~···)	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BE	LOW:
Client Name:			Phone #:
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Date 7/24	11/2		NCIL'S RULES (L BE ENFORCE		Council File No	o., Agenda Item, or Case	No.
I wish to speak bef		City	(ouncil	<u> </u>			
	Nam	e of City Agency,	Department, Con	nmittee or (Council		
Do you wish to pro	vide general public c	<i>K</i> 3				Mark Nanot near a	sal
Name:	<u>Megap</u>	M KI	Jan_			() General comm	
Business or Organi	zation Affiliation:						
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Address:	Street		City		State	Zip	
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·	YOU ARE A PAID						
Client Name:			***************************************		<u> </u>	Phone #:	······································
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Date 7-24-12 THE MARKET BIR	THE CITY COUNCIL? DECORUM WILL BE		Council File No., Ager	nda Item, or Case No.
	ame of City Agency, Depar	troopt Committee or Cou	ınail	
IV	arrie or City Agency, Depar	ment, Committee of Co	JI IÇII	
Do you wish to provide general publication: Name:	th Bolay	r or against a proposal of welled	n the agenda? () Harpatu	For proposal Against proposal General comments
Address:				
Business phone: 30-24	Cit	y	State	Zip
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PRO	VIDE CLIENT INFORM	ATION BELOW:	
Client Name:			Phone	#:
Client Address:				
Street	City	/	State	Zip

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4				
7 24/12		COUNCIL'S RULES OF I WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the		8 City Courcil		
	Name of City Age	ency, Department, Comm	ittee or Council	
Name: WILLAM 1	eneral public comment, or MACKEN 216 - SM Affiliation:	74		() For proposal () Against proposal () General comments
Address:		·		
Address:Stree	et	City	State	Zip
Business phone:	Repres	enting:		Processing of the second of th
CHECK HERE IF YOU	ARE A PAID SPEAKER	AND PROVIDE CLIENT	INFORMATION BELOV	v :
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Date 724 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			
	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	-	a? () For proposal () Against proposal () General comments
Business or Organization Affiliati	ion:		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	rmation bel	.ow:
Client Name:			Phone #:
Client Address: Street	City	State	Zip

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Date 7/24/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., As	genda Item, or Case No.
I wish to speak before the	Council		
	Name of City Agency, Department, Comm	ittee or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a	proposal on the agenda? () For proposal Against proposal General comments
Name.	00-11-00-10-1	10/2 P 000 1	
Business or Organization Affiliation	on: MOTHEV Vatu	ve's hand	1
Address: 6480 N	rento St. Simi 4	allex and	9306
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELOW	
Client Name:		Phoi	ne #:
Client Address:			
Street	City	State	Zip

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1			OFFICE TO OALL OF OR	100
Date	24/2	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	Council File No., A	genda Item, or Case No.
I wish to spe	ak before the	11 000	nelv	
		Name of City Agency, Department, Committ	ee or Council	
Do you wish	to provide general	public comment, or to speak for or against a pr	roposal on the agenda?	Against proposal
Name:			·	() General comments
	-	ion:		
Address:	Street	City	State	Zip
		Representing:		
CHECK HE	RE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW	<i>t</i> :
Client Name	•		Pho	one #:
Client Addre	SS:	Oth.	Chale	72
	Street	City	State	Zip

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7/24/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	CITY COUNCIL		
· ,	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 pro	oposal on the agenda?() For proposal) Against proposal
Name:	oliver!	() General comments
Business or Organization Affiliati	on:		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW	:
Client Name:		Pho	ne #:
Client Address:Street	City	State	Zip

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Date 7-24 -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	CITY COUNCIL	0		
Do you wish to provide general p	Name of City Agency, Department, Committee or bublic comment, or to speak for or against a propose		a?()For proposal	
Name: F.dward	Verinne bel		() Against proposal () General comments	
Business or Organization Affiliati	on: Fagle Rock Herbal Collect	We		
Address: 4729 Fagle	Rach Blvd. Los Angeles	<u>Ç</u> ∆State	900 4.1 Zip	
Business phone: (323) 251-4	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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Date	THE CITY COUNCIL'S RULES OF	Council File No., A	genda Item, or Case No.
7-24-12	DECORUM WILL BE ENFORCED.	#5	
I wish to speak before the	Council /CH 35		
	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general	public comment, or to speak for or against a propose	al on the agenda? () For proposal
		() Against proposal
Name: William	Kusposi 10	() General comments
,			
Business or Organization Affiliat	ion: SELF	······································	
Addroce:			20011
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW	:
Client Name:		Pho	ne #:
Oli t. A dalua a a .			
Client Address:	Citv	State	Zip

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Date / /	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.	
07/2/1/2	DECORUM WILL BE ENFORCED.	45	
UT/94/19		<u> </u>	
I wish to speak before the	Gter Council		
•	Name of City Agency, Department, Committee	ee or Council	
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: CJ. Ye	Ktazarian	() General comments	
·	•		
Business or Organization Affiliat	ion:	A	
Addroop	102	Amalle CA.	
Address:Street	City	State Zip	
	Representing:		
•			_
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:	
Olivery Allered		DI	
Client Name:		Phone #:	-
Client Address:			
Street	Cîty	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 DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the	<i>L, D. CTTy COUNCIT</i> Name of City Agency, Department, Committee o	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
•	DR ENGLE ROCK	<u>Op</u>	90041
	Representing:	State	~ih
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELC	ow:
Client Name:		P	Phone #:
Client Address:	City	State	Zip

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Date 7/24/12	THE CITY COUNCI DECORUM WILL B		Council File	No., Agenda Item, or Case No.
I wish to speak before the	CITY COUNC Name of City Agency, Dep		r Council	
Do you wish to provide general p	oublic comment, or to speak			Against proposal
Name: SAM HUI			· · · · · · · · · · · · · · · · · · ·	() General comments
Business or Organization Affiliation	on: PERENNIAL	HOLISTIC	WELLNO	FSS CENTER
Address: 11705 VE	VTURA BLUD	STUDIO	CITY .	CA 91604
Address: 11705 VEP Street Business phone: 885 50	の5 多岁 Representing:	City SELF	State	Zip
CHECK HERE IF YOU ARE A				
Client Name:		Market 1999 (1999) to the contract of the cont		Phone #:
Client Address:Street	(Dity	State	Zip

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Date 7-24-12	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	City Council		
Nam	e of City Ágency, Department, Committee or C	Jouncil	
Do you wish to provide general public c Name: ### JUSTIS	omment, or to speak for or against a proposal	on the agend	a? () For proposal Against proposal () General comments
Business or Organization Affiliation:	ouds and Roses Collec	tue	
Address: 13235 Ven	tura blud Studio City	CA	91604
Business phone: 8189078852	City / Representing:	State	Zip
	SPEAKER AND PROVIDE CLIENT INFOR	MATION BEL	ow:
Client Name:		***************************************	Phone #:
Client Address:			
Street	City	State	Zip

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Date 7/24	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	- · · · · · · · · · · · · · · · · · · ·	e No., Agenda Item, or Case No.
I wish to speak before the	LA City	SUNCI /	
_	Name of City Agency, Department,	Committee or Council	
Do you wish to provide general p	public comment, or to speak for or aga	inst a proposal on the age	nda? () For proposal () Against proposal
Name: //NCENT	/VICOLEHI		() General comments
Business or Organization Affiliation	on: GLACA		
Address: 14455	Dickens St. She	SMAN ORKS	CA 9/423
Street	City	State	Zip
Business phone:	Representing:		The state of the s
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE O	LIENT INFORMATION B	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 7/24/12	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	Name of City Aganay Dangstmont Committee 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 (X) Against proposal (X) Against proposal (X) General comments			
Business or Organization Affiliation:			
Address: 464	Lucas Ave Los An	gel 98 State	9001+ 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

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Date 7/24/2012	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. IEEM #5 MEDICAL MARIJUAN
I wish to speak before the	A City Council Name of City Agency, Department, Committee	
Do you wish to provide general	public comment, or to speak for or against a pi	roposal on the agenda? () For proposal
Name: SARAH AR	nstrong	Against proposal () General comments
Business or Organization Affiliat	ion:	
Address: 6951 Res	sear Be Resear	CA 91335
	Representing:Se/f	Side Zip
	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 7-24-/2	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.	
1 64 16	DECORUM WILL BE ENFORCED.			
I wish to speak before the $C:\mathcal{F}$	1 Council			
,	Name of City Agency, Department, Committee of	or Council		
Name: DAVID STOCUM	public comment, or to speak for or against a propo		? () For proposal	
	00-41 \ 00 .//			
Business or Organization Affiliati	on: MOTHER NATURES REMERY			
Address: 20634 ARC	on: Mother NATURES Remedy LWOOD ST Wirner RA CA	9/406		
Street	City	State	Zip	
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		P	hone #:	
Client Address:Street				
Street	City	State	Zip	

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Date 7/24/12	THE CITY COUNCIL		Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Vame of City Agency, Depart	oure]	Council	
Do you wish to provide general publ	lic comment, or to speak f		ıl on the agenda	(? () For proposal () Against proposal () General comments
Business or Organization Affiliation:				
Address: 16610	Haynes St	Van No	State	91406
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PA			RMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:	C	ity	State	Zip

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		_		
Date 7/24/12	THE CITY COUNCIL'S R DECORUM WILL BE ENI		Council File N	o., Agenda Item, or Case No.
I wish to speak before the	Cory (ouncil		
Nam	ne of City Agency/Departme	nt, Committee or C	ouncil	
Do you wish to provide general public of Name:	Noccim	against a proposal		a? () For proposal () Against proposal () General comments
Business or Organization Affiliation:				
Address: 4660 6		Van XV	State	91406
Business phone:	,		<u> </u>	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVID	E CLIENT INFOR	MATION BEL	ow:
Client Name:				Phone #:
Client Address:	City		State	Zip

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Date 1/02	1/12	THE CITY COUNCIL'S R		Council File No.	, Agenda Item, or	r Case No.
I wish to speak befo		C_{\Box}	Counci	Council		
	ide general publ	ic comment, or to speak for or Johns Fon	against a proposa	al on the agenda?	(🌇) Against	osal proposal comments
Business or Organiz	ation Affiliation:					
Address:	Street 0	Van Nays	#24	Panoram State	a City	91402
·		Representing:			w:	
					none #:	
Client Address:	Street	Citv		State	Zip	

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7/24/12	THE CITY COUNCIL'S RI DECORUM WILL BE ENF		le No., Agenda Item, or Case No.
I wish to speak before the		mac T	
Do you wish to provide general	Name of City Agency, Department public comment, or to speak for or a		nda? () For proposal
Name: <u>faul</u>	Barrera		(X) Against proposal () General comments
Business or Organization Affiliati	on:		
Address: (Street	S. La brea city	Los Angeles	90019 Zin
	Representing:		- Lip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDI	E CLIENT INFORMATION B	ELOW:
Client Name:		***************************************	Phone #:
Client Address:	City	Chata	7:
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
7/74/17	DECORUM WILL BE ENFORCED.	5	
1/04/20			***************************************
I wish to speak before the	City Council		
·	Name of City Agency, Department, Committee	e or Council	
Do you wish to provide general Name: Mick S	ral public comment, or to speak for or against a pro		? () For proposal (>> Against proposal () General comments
Business or Organization Affi	iliation:		
Address:			90230
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELC	ow:
Client Name:		P	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 I wish to speak before		THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE	50.	lo., Agenda flem, or Case No.
Do you wish to pro Name: Business or Organi	vide general public o	e of City Agency, Department, Concomment, for to speak for or against	1100	a? () For proposal () Against proposal () General comments
Address:				
Business phone:	The SOB	City Representing:	State	Zip
CHECK HERE IF	YOU ARE A PAID	SPEAKER AND PROVIDE CLI	ENT INFORMATION BEL	.ow:
Client Name:				Phone #:
Client Address:	Street	City	State	Zip

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Date 7 (24)	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	` \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	Tonei \	
	Name of City Agency, Department, Conn	mittee or Council	
Do you wish to provide general [public comment, or to speak for or against a	a proposal on the agenda	? () For proposal
Name: Tamrer	public comment, or to speak for or against a		() Against proposal () General comments
Business or Organization Affiliati			
Address:	Los Ang	peles CA State	90019
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BELO	ow:
Client Name:		F	hone #:
Client Address:			
Street	City	State	Zip

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	·		
Date 1/24/12	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	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:		
Address:Street	City	State	Zip
	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INF		
Client Name:		Ph	one #:
Client Address:			
Street	City	State	Zip

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Date 1/2+1/2	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 Agenty, Department, Committee or	Council	
Do you wish to provide general p	oublic comment, or to speak for or against a propose		a?()For proposal
Name:	Kamani Evans		() Against proposal () General comments
Business or Organization Affiliati	on:		
Address:Street	City	State	Zip
	Representing:		
,	PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Name:		***************************************	Phone #:
Client Address:			
Street	City	State	Zip

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Date 1124 (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	public comment, or to speak for or against a prop	osal on the agenda?	For proposal Against proposal General comments
	ion:		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELOV	v:
Client Name:		Ph	one #:
Client Address:	Cih.	State	71
Direct.	City	State	Zip

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Date 7 - 24 - 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 L.A.	City Council						
Name of City Agency, Department, Committee or Council							
Do you wish to provide general public Name: MA++ルシル	comment, or to speak for or against a	proposal on the agend	da? () For proposal (X) Against proposal () General comments				
	Next Generation	Canhabis	Club.				
Address:							
Business phone: (8/8) Z 58-9°	건네 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				

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Date 7/24/12	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	Name of City Agency, Department, Committee or	Council					
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal Against proposal Name: () General comments							
Business or Organization Affiliation:							
Address: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:Street	City	State	Zip				

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<u>.</u>							
John Jy.	2012	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No. A	genda Item, or Case No. 1737 1737-S1			
I wish to speak befo	ore the	City Coased					
•		Name of City Adency, Department, Committee	e or Council				
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal Name: () Against proposal () General comments							
Business or Organization Affiliation:							
Address:							
	Street	City	State	Zip			
Business phone: _		Representing:		***************************************			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:							
Client Name:			Pho	ne #:			
Client Address:	Street	City	State	71			
	311 881	City	Sidile	Zip			