#### CIT DF LOS ANGELES SPEAKEF ARD

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NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE. YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK, EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

EXCEPTION	THE EXTERN RECESSARY FOR THE PRESIDING	OFFICER TO CALL OF	/N 100
Date 9-10-12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Commit	t <del>lee os</del> Council	
	Name of ony rigoroy, Departmont, commit	Ocurion	
Do you wish to provide general p	oublic comment, or to speak for or against a p	proposal on the agenda?	(Against proposal
Name: Mar by	//(ME		General comments
Business or Organization Affiliati	on:		
Address: 1545	Wilshire Blud, &	th Flor	900/7
Business phone: 213-47	9-9176Representing:APN	1A State	Zip (
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	w:
Client Name:		P	none #:
Client Address:			
Street	City	State	Zip

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Date 9/10/12	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the	BLUGET + F. NANCE		
	Name of City Agency, Department, Commit	tee or Council	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal Against proposal ( ) General comments  Business or Organization Affiliation:			
Address:			
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:	City	State Zip	
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Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
Date 9-10-12	DECORUM WILL BE ENFORCED.	4	12-0692
I wish to speak before the			
	Name of City Agency, Department, Committee or	Council	
Name: Row Mill	public comment, or to speak for or against a propos		a? ( ) For proposal (★ Against proposal ( ) General comments
Rusiness or Organization Affiliation: LA LOE BUILDING TRADES			
Address: 1626 Bevery BLVD			
Business phone: 213 483		State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		<u> </u>	Phone #:
Client Address:	All.	0: 1	
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
9-10-12	DECORUM WILL BE ENFORCED.	17-06	972
I wish to speak before the BUCET & FINANCE Comm.  Name of City Agency, Department, Committee or Council			
Name:			( ) General comments
Business or Organization Affiliation: AFSCME CONCL36			
Address: 514 Street	MATTO PL.	01-1	
Business phone: 213-487-	9887 Representing: SAUE	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		Ph.	ione #:
Oliant Address			
Client Address:Street	City	State	Zip

# CITY OF LOS ANGELES SPEAKER ARD

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.	
9/10/12	DECORUM WILL BE ENFORCED.	4/12-0692	
I wish to speak before the	Bo F Cons.	t	
·	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general   Name: <u>LWY</u> Fyssi	public comment, or to speak for or against a propos	al on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments	
Ivaille. PART	. A A a C		
Business or Organization Affiliati	ion: <u>19 9910 SHOW</u>		
Address: 1/035 W 0	LYMPIC	90064	
Street	City	State Zip	
Business phone: 310 444 18	BSO Representing: LA ADTO SE	low	
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 9 - 10 -2012	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORC	· ·	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Co	mmittee or Council	
	Name of Ony Agency, Department, Oc	of the state of th	
Do you wish to provide general p	public comment, or to speak for or agains	st a proposal on the agenda?	) For proposal
Name: US	AGUILAN	(	<ul><li>) Against proposal</li><li>) General comments</li></ul>
Business or Organization Affiliation	on: LACONVENT	in Center	
Address: 1701	S. FIGURDA:	57, WACA	90015
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		Phor	ne #:
Client Address:			
Street	City	State	7in