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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

		- ·····
Date 9-2-15	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 Council	
•	Name of City Agency, Department, Committee or	Council
Do you wish to provide general Name:	public comment, or to speak for or against a propos	al on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affilia	tion: Sitrra Club	
Address:		
Address:Street	City	State Zip
Business phone:	Representing: M-/(LH)	-
	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:	City	State Zip

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#15

Date 9 - 2 - 15	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 propos	al on the agenda	? ( ) For proposal			
Name: Dael W	ilcox		Against proposal  ( ) General comments			
Business or Organization Affiliation: Bee Safe Alliance						
Address: 8399 Gothic Avenue LA 91344  Business phone: Representing: Bee Safe Alhance						
Street Business phone:	Representing: Bee Safe +	Hhance	Zip			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:		f	Phone #:			
Client Address:						
Street	City	State	Zip			

#15

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DNS

Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
9-2-15	DECORUM WILL BE ENFORCED.	12-0785
I wish to speak before the	Name of City Agency, Department, Committee or	Council
• • • • •	public comment, or to speak for or against a propos	
Name: Marcia	Rozelle	( ) Against proposal General comments
<del>-</del>	on: homeowner/parent	_
Address: 737	Chapala Dr. Pacifi	c Palisades GA 900
Business phone:	Representing: SEIF Famil	y Friends all residents
	A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:	Cia.	Chata
Street	City	State Zip

#15

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DNS

Date	THE CITY COUN	CIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
9-2-15	DECORUM WILL	BE ENFORCED.	12-	0785
I wish to speak before the		epartment, Committee or	Council	
Do you wish to provide general p	oublic comment, or to spea	ak for or against a proposa	al on the agenda	a? ( ) For proposal
Name: Marcia	Rozelle			Against proposal  ( ) General comments
Business or Organization Affiliati	on: homeow	ner parent	of aller	rgic kids
Address: 737 Char	sala Drive	Pacific Pal	isades	CA 90277
Business phone:				
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND F	PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip

#15

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Date	THE CITY COUNCIL'S RULES	OF Council File No	o., Agenda Item, or Case No.
9-2-15	DECORUM WILL BE ENFORC	ED. 12 -0	785
I wish to speak before the	City Council		
·	Name of City Agency, Department, Co	ommittee or Council	
Do you wish to provide general p	oublic comment, or to speak for or again	st a proposal on the agenda	(? ( ) For proposal
Name: Dael W	ilcox		( ) Against proposal General comments
Business or Organization Affiliati	on: Bee Safe All	iance	
Address: 8399 6	aothic Avenue L	A 91344	
	City Representing: Bee		Zip L <b>e</b>
	A PAID SPEAKER AND PROVIDE CL		
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip



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Date 2	20	15	THE CITY COU DECORUM WI			Co	uncil File N	lo., Agenda Ite	em, or Case No.	
I wish to speak be	efore the									
		Nam	e of City Agency,	, Department.	, Committee	or Counc	il			
Do you wish to pr	rovide ger	neral public o	omment, or to sp	oeak for or aç	gainst a prop	osal on th	ne agend		proposal	
Name:		$\underline{Q}$	<u>n</u>	MILANA AMILAN AMIN'NY	LLAN, LLOW CLAY CLASSIC ALONG A STREET, LANGUE PER CLAY CLASSIC APP A STREET, OF A STREET, OF A STREET, OF A ST				ainst proposal neral comments	
Business or Orga	nization A	ffiliation:								
Address:	Street	4 -	7 4	Oity City	7		State	$\frac{\mathcal{G}}{Z_{ip}}$	(50	- ]
Business phone:			Representir	ng:						
CHECK HERE II	F YOU A	RE A PAID	SPEAKER AN	D PROVIDE	CLIENT INF	ORMATI	ON BEL	.ow:	The state of the s	
Client Name:							.,,,	ورن # Phone	<i>f</i> ! ^ æ	= -
Client Address: _	Street	or-	thh	City	LX	W	<i>O O</i> State	6 Zip	160	- (

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i /	MILKE NEOLOOPHY I OH HILL PHEOLOHOU	The one of the order of the ord
Date 9/2/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the		
Na	ame of City Agency, Department, Committe	e or Council
Do you wish to provide general public Name:  Business or Organization Affiliation:	c comment, or to speak for or against a pro	oposal on the agenda? ( ) For proposal Against proposal General comments
Address:Street		
Street Business phone:	Representing:	Sate Zip
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip