CF#12-1681

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Date 2   17   15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
	EDUCATION + NEIGHBORHOODS  Name of City Agency, Department, Committee or		,
Do you wish to provide genera	al public comment, or to speak for or against a propos	al on the agenda	? ( For proposal
Name: MARTIN S			( ) Against proposal     ( ) General comments
	ation: COUNCILMAN HUIZAR	's OFFICE	5
Address:Street	City	State	Zip
Business phone: 2/3 473	7714 Banasastinas	Olato	
	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		P	Phone #:
Client Address:			
Street	City	State	Zip

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FEB. 17, 2015  I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	
Do you wish to provide general public com	of City Agency, Department, Committee or nument, or to speak for or against a proposa	al on the agenda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation:	BLVD. L.A, CA	9oc43 State Zip
	Representing:	-
CHECK HERE IF YOU ARE A PAID S	PEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 02/17/2015	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		E
Do you wish to provide general p	public comment, or to speak for or against a propos	al on the agenda	? ( For proposal ( ) Against proposal
Name: CLIEFOND 1	2. MOKLET		( ) General comments
Business or Organization Affiliation		CA	90042
Street	1 AN ATE. L.A. City	State	Zip
Business phone: 323 495 -	6712 Representing:		
	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 02/17/15	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 of public comment, or to speak for or against a proposition		a? ( Þ) For proposal
Name: Christopher Ga			( ) Against proposal     ( ) General comments
Business or Organization Affiliati Address: 625 Coleman Street	on:  Are los Angeles  City	State	90043 Zip
Business phone:	Representing:A PAID SPEAKER AND PROVIDE CLIENT INFO		
	A FAID SPEAKEN AND PROVIDE CLIENT INFO		Phone #:
Client Address:Street	City	State	Zip

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Date 82(17)(5		TY COUNCIL'S RULES OF UM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.
I wish to speak before the	1	Agency, Department, Committee	or Council	
Do you wish to provide ger	neral public comment,	or to speak for or against a prop	osal on the agend	a? (木) For proposal
Name: BRYAN A	. HERNANDEZ	Salas		( ) Against proposal     ( ) General comments
Business or Organization A	Affiliation:			
Address: 625 Cal	cman goz	Cos Angoles	C-A. State	90047 Zip
Business phone:		resenting:		
CHECK HERE IF YOU A	RE A PAID SPEAKE	ER AND PROVIDE CLIENT IN	FORMATION BEI	LOW:
Client Name:				Phone #:
Client Address:		City		

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Date 02/17/15		COUNCIL'S RULES OF WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the		ency, Department, Committee	or Council	
Do you wish to provide general Name: Fernando Fi		to speak for or against a propo		? (♥ For proposal  ( ) Against proposal  ( ) General comments
Business or Organization Affilia	ition:			
Address: 625 CO/6	eman Ave.	Los Angeles	C/A State	90042. Zip
Business phone:	Repres	senting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT INF	ORMATION BEL	ow:
Client Name:			F	Phone #:
Client Address:Street		City	State	Zip
Olicet		Oity	Otate	Z.Ib

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2/1/19	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	of City Agency, Department, Committee	or Council	
Do you wish to provide general public con	mment, or to speak for or against a propo	osal on the agend	la? ( / ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation: Hea	rmon Church		
Address: 5718 Monterey Rd Street	City	State	9 004 Z Zip
Business phone:			
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INF	ORMATION BEI	LOW:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 2 (7/15	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 C	Council	
Name: Wendi F	oublic comment, or to speak for or against a proposa Risek on: Hermon Alwan (		Proposal  ( ) Against proposal  ( ) General comments
	Pine Crest Dr LA	State	96042
Business phone:	Representing:	State	7
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELC	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date 2/17/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		nda # 1
I wish to speak before the	Name of City Agency, Department, Committee		/
Do you wish to provide general pub	olic comment, or to speak for or against a propo	sal on the agenda	? ( For proposal
			Against proposal     General comments
Business or Organization Affiliation:	Daniels Hermon Communi	Ty	
Address: 6282 P	NE Crest		
Business phone: 255 14	NE Crest  City  Self  Self	State	Zip
	PAID SPEAKER AND PROVIDE CLIENT INF		ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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Date 2/17/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.  1 + em #1 (+1 /e 12 -165
	ELW Committee ame of City Agency, Department, Committee	or Council
Do you wish to provide general publi	ic comment, or to speak for or against a propo	osal on the agenda? (X) For proposal
Name: Joseph	RISET Hermon Community	( ) Against proposal ( ) General comments
Business or Organization Affiliation:	Helmori Commonity	
Address:	City	State Zip
Business phone: 376-900	Representing: City	Otate Zip
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 2-17-15	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	EAH Committee of Name of City Agency, Department, Committee of	r Council	
Do you wish to provide general Name: LEO NARD  Business or Organization Affilia	public comment, or to speak for or against a proposed in the second seco		A? Nor proposal  ( ) Against proposal ( ) General comments
Address:Street		State	Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 2/17/5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	E+M  Name of City Agency, Department, Committee of	r Council	
Do you wish to provide genera	al public comment, or to speak for or against a propo		( ) For proposal
Name:	Try Harval		Against proposal  ( ) General comments
Business or Organization Affili	iation:		
Address:	07	Object	7'-
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	E A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	w:
Client Name:		Pr	one #:
Client Address:			
Street	City	State	Zip

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Date 2/17/15	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 Name:	public comment, or to speak for or against a prop	oosal on the agenda? ( ) For proposal ( ) Against proposal Seneral comments
Business or Organization Affiliation Address: 644 Pa/M	5 Blvd Venue	95291 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:	<u> </u>	Phone #:
Client Address:Street	City	State Zip

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1117 7615	COUNCIL'S RULES OF M WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.  AGGNSA # 1		
I wish to speak before the EDUCATION AND NEIGHBORHOUS COMITTEE				
Name of City Ag	ency, 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 ( ) General comments				
Name: (X) General comments				
Business or Organization Affiliation: SHD FOW NEIGHBORHOOD CONCLECT				
1626 11 1 11 MON ALL	#924 HOLLYWOO	\(\text{A.900}\text{State}\)		
Business phone: 333.445.0733 Representing: SHIB PAW PESIDENS				
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 2-17. 2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case	e No.
I wish to speak before the			
Name: ARTHUR	Name of City Agency, Department, Committee or public comment, or to speak for or against a propose Spramile	al on the agenda? ( 4) For proposal ( ) Against proposal ( ) General com	
Address:Street	City	State Zip	W-7
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:	
Client Name:		Phone #:	
Client Address:Street	City	State Zip	

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THE CITY COUNCIL'S RULES OF

Council File No., Agenda Item, or Case No.

Date

20/80/5	DECORUM WILI	L BE ENFORCED.	\$70	m #/
I wish to speak before the		Department, Committee or		Committe
Do you wish to provide general posterior of the provide general po	Jun 6	ak for or against a propos	al on the agenda	? 🖄 For proposal ( ) Against proposal ( ) General comments
Address:Street		City	State	Zíp
Business phone:	Representing	:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND	PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		II.	F	Phone #:
Client Address:Street		City	State	Zip

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Date Heb 17, 2015  I wish to speak before the  Nan	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  FOUL * WOW Management of City Agency, Department, Committee of City Agency, Department of City Agency	Council File No., Agenda Item, or Case No.
Do you wish to provide general public Name:	comment, or to speak for or against a propos	( ) Against proposal
Business or Organization Affiliation:	main 50 # 23	) (A. 90013 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A PAIL	O SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date Date Nar	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  me of City Agency, Department, Committee or	Council File No., Agenda Heih, or Case No.
Do you wish to provide general public	comment, or to speak for or against a propos	al on the agenda? ( ) For proposal
Name: Vowe	Michelle Antry	( ) Against proposal ( ) General comments
Business or Organization Affiliation:	o West with Stee	X # 1338 (A OK
Business phone: 2 Street 805 (	7 (Representing: City Self	State Zip 900
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip