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Street

Street

Business phone: 626-458-8646

Representing: Fasadera Group a Fielda CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BEI OW: Client Name: Phone #: Client Address: City State Zip

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Date /	THE CITY COUNCIL'S I	RULES OF	Council File No., Age	enda Item, or Case No.
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. Wien to opean serere the	Name of City Agency, Departm	ent, Committee or C	Council	
	public comment, or to speak for o	r against a proposa	on the agenda?) For proposal
Name: Kent	Tinaul+		() Against proposal) General comments
	1 1 5	101		c 1 1
Bu siness or Organization Affiliation	ion: LA Deyon	d Coal-	SIErra	Club
Address: 13214 M	ion: LA Beyon agnolia Blod S city	herman Oa	ks CA	9/423
Street	City		. State '	Zīp
Bu siness phone:	Representing:	- Mariana		
CHIECK HERE IF YOU ARE	A PAID SPEAKER AND PROVI	DE CLIENT INFOR	RMATION BELOW:	
Client Name:			Phone	e #:
Client Address:				
Street	City		State	Zip

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Address: Street Business phone: 323 2	46.565 Representing:	ty	State	Zip	
CHECK HERE IF YOU ARE A					
Client Name:		~	Ph	one #:	
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Date 4/23/2013	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO		e 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	oublic comment, or to speak for or ag		() Against proposal
·			() General comments
Business or Organization Affiliation	on: <u>UKUC</u>		
Address: DH 2M St Street	Sata	Mari L CAP State	10040
	2300 Representing: DR		Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORMATION B	ELOW:
Client Name:			_ Phone #:
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Date 423 13 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
,	Name of City Agency, Department, Committee	tee or Council
Name: Kokay Kwa Business or Organization Affiliation	oublic comment, or to speak for or against a post on:	roposal on the agenda? (V For proposal () Against proposal () General comments
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Client Address:	City	State Zip

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04.23.13	DECONOM WILL BE ENFORCE	J.	##
I wish to speak before the	City Council		
	Name of City Agency, Department, Com	mittee or Council	á
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•	tion: SCOPE		
Address:/7/5 \u00bc	V. Florence Ave	90047	
Business phone: 323 789	V. Florence Ave City 77920 Representing: <u>Com</u>	mmity	Zip
	A PAID SPEAKER AND PROVIDE CLIE	·	ELOW:
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Date	THE CITY COUN	CIL'S RULES OF	Council File No., A	genda Item, or Case No.
4/23/13	DECORUM WILL	BE ENFORCED.	# 4:	
I wish to speak before the	att council.		' "	
	Name of City Agency, D	epartment, Committe	e or Council	
Do you wish to provide general p		k for or against a pro	pposal on the agenda?	() Against proposal
Name: Aura Vaso	wet			(C) General comments
Bu siness or Organization Affiliati	ion: <u>Sierra Club</u>	Beyond Co	al campara	ήν·
Bu siness or Organization Affiliation Address:	Hmpre Bluz	los An	seles CA	900021
Bu siness phone:	Representing:	city Szerra elus	Betand Coal.	Zip
	A PAID SPEAKER AND I		NFORMATION BELOW	<i>I</i> :
Client Name:			Pho	one #:
Client Address:				
Street		City	State	Zip

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Date APRIL 23, 2013	THE CITY COUNCIL'S RULI DECORUM WILL BE ENFOR		ile No., Agenda Item, or Case No.
I wish to speak before theN	4 CTY COUNCIL lame of City Agency, Department,	Committee or Council	- And the second
Do you wish to provide general publ	ic comment, or to speak for or aga	inst a proposal on the ag	enda? (X) For proposal
Name: BRUCE CAMP	BELL		() Against proposal () General comments
Business or Organization Affiliation:			
Address: 3520 Overland A	Ve. # 149 L.A.	C A State	90034 Zip
Business phone:			
CHECK HERE IF YOU ARE A PA			BELOW:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 4 25 B	THE CITY COUNCIL DECORUM WILL BI	'S RULES OF E ENFORCED.	Council File No., A	genda Item, or Case No.
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Name:	TO GALAMIC			y donoral community
Business or Organization Affiliati	ion: Soust	CZZYL	-A Sour	(L)
Address: <u>(334</u>	ARTEURS PL	-, LA'	Cp.	90045
Business phone: 3034		Solan C	State 277	Zip
CHECK HERE IF YOU ARE A		OVIDE CLIENT INFOR	RMATION BELOW	<i>f</i> :
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EXCEPT TO THE EX	XTENT NECESSARY FOR THE PRESIDIN	G OFFICER TO CALL UPON Y	N, OU
Date	THE CITY COUNCIL'S RULES OF	Council File No, Agei	nda Item, or Case No.
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<u>/</u>			
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/ Na	me of City Agency, Department, Comm	ittee or Council	Man
Do you wish to provide general public	comment, or to speak for or against a	proposal on the agenda? (For proposal Against proposal
Name:	NA651)) General comments
Business or Organization Affiliation:			
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAI	ID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELOW:	
Client Name:		Phone	e #:
Client Address:			
Street	City	State	Zip