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Date 4/11/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Conril	(Ifm # 12)
Name	e of City Agericy, Department, Committee	or Council
Do you wish to provide general public o	omment, or to speak for or against a propo	sal on the agenda? () For proposal () Against proposal () General comments
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Business or Organization Affiliation:	Baldwin Hills	Construmen
Address: 5120 W. C.	old Deax Undo	90056
Business phone: 377, 330 527	2 Representing:	State Zip
, , ,	SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date	THE CITY COUNCIL	'S RULES OF	Council File No., A	genda Item, or Case No.
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Name: Charle				() General comments
Business or Organization Affiliat	ion: METRO	- project	· Prostor	Creushaw/LA
Address: <u>One G</u>	Yewy PLAZA	ity L.A	State	2ip 90016
Business phone: 213 842	6/4/ Representing:	MOTE		
CHECK HERE IF YOU ARE	·		MATION BELOV	/ :
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Date 4/11/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		lo., Agenda Item, or Case No. ecial Agenda
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, Business or Organization Affiliati	on: Metro-Environmental		
Address: <u>One Gathway D</u> Street Business phone: <u>913</u> 900	(aza, M 5 99-17-0 205 f City 7305 Representing:	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date A/11/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	enda Item, or Case No. IAI ANNÁA
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Business phone: 713. 922.21	Representing: MCTO A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION RELOW:	
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Date	THE CITY COUNCIL'S RULES OF	Council File No.	., Agenda Item, or Case No.
4/11/2014	DECORUM WILL BE ENFORCED.	9	13-0844
I wish to speak before the		7	#12 CD8,9,10
	Name of City Agency, Department, Committee	or Council	
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Rusiness or Organization Affiliati	ion: HADHOOL Builder	I rc.	
Address: 5444 CR	Lerishaw Blud. L.A.	Car	
Street Business phone: 323 22		State	Zip
	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		P	hone #:
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	6000		y, concra commond
Business or Organization Affiliation	on:		
Address: PJ/ A		ACA GUD	71 _{Zip}
Business phone: 7864	-73/4 Representing: SF	£	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CL	IENT INFORMATION BELO	w:
Client Name:		Pr	none #:
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Business or Organization Affiliation: Enfowment Engree West Avec. Address: 3731 Sfxkex LA CA 904 Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:			
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Name: LARK GAILOWAY GILLOW Business or Organization Affiliation: Engreusement Congress West Area Address: 3731 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:		Name of City Agency, Department, Com-	mittee or Council
Business or Organization Affiliation: Enfowment Engree West Avec. Address: 3731 Sfxkex LA CA 904 Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Name: LARK G	Aloune Gilliam	() Against proposal () General comments
Address:Street		Ell	a a company of the second
Address:Street	Business or Organization Affiliation	1: Ergower Merr Co	myree west Arec
Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Address: <u>3731</u> S	ticker LA	CA 90081
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	Client Address:	City	State Zip

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Date / /	THE CITY COUN	ICIL'S RULES OF	Council File	No., Agenda Item, or Case No.
04/11/2014	DECORUM WILL	BE ENFORCED.	12-1	3-0844
I wish to speak before the	ty Council Ru	les		世门
,	Name of City Agency, D	epartment, Committe	e or Council	
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Address: <u>5349 Cul</u>	1show PL	LA	<u>Ca</u>	90043
Address: 5349 Culv Street Business phone323, 298, 1	6/24 Representing:	City	State	Zip
CHECK HERE IF YOU ARE			NFORMATION BE	LOW:
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Date	THE CITY C	OUNCIL'S RULES OF	Council File No.,	Agenda Item, or Case No.
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,	Name of City Agend	cy, Department, Committee o	or Council	
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Business or Organization Affiliati	on: PARK Mes.	A Heights Commu	with course	it
Address: <u>534900en</u> Street			1	
			State	Zip
Business phone: 323 298	<u>- 6 [ヱ午</u> Represen	ting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER A	ND PROVIDE CLIENT INF	ORMATION BELO	w:
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