13-08T1 13-0877-5/

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Date 8-28-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general	oublic comment, or to speak for or against a propo		
Name: DAVID GAT	FINKLE		Against proposal) General comments
Business or Organization Affiliati			
Street Business phone: 8/8 88	IN AUE TARZANA CA City 1-6318 Representing: TARZANA PROF	State SENTY OWNERS	Zip A-SSCIC.
	A PAID SPEAKER AND PROVIDE CLIENT INF		
Client Name:		Pho	ne #:
Client Address:Street	City	State	Zip

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Date 8/28/13	THE CITY COUNCIL'S F DECORUM WILL BE EN		ouncil File No., A	genda item, or Case No.
I wish to speak before the	C/7Y COUNCIL Name of City Agency, Department	ent, Committee or Coun	cil	
Do you wish to provide general posterior Roy NAKA	oublic comment, or to speak for or	against a proposal on t	he agenda?(((For proposal) Against proposal) General comments
•	on: CRAINY ASS			
Address: 300 Corpo	city	Culver City	CA State	90230 Zip
Business phone: (3/0) 473	-6508 Representing: Ap	plicant	***************************************	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVID	DE CLIENT INFORMAT	ION BELOW	: 🔀
Client Name: M. Davi	of Paul		Pho	ne #:
Client Address:				
Street	City	•	State	Zip

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Date 8/28//3	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.
I wish to speak before the	CITY COUNCIL		
	Name of City Agency, Department, Committee or C	Council	
Name: Roy NAKAM		I on the agend	a? () For proposal () Against proposal () General comments
Business or Organization Affiliati	ion: CRAIN + ASSEC.		
	Ac Pointe #470 Culver City -6508 Representing: Applicant	CA State	90230 Zip
Business phone: $(310)473$	-6508 Representing: Applicant		ZIÞ
	A PAID SPEAKER AND PROVIDE CLIENT INFOR		.ow: 📉
Client Name: M. Quid	Paul		Phone #:
Client Address:	City	State	Zip

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Date	THE CITY COUNC	CIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
8/28/13	DECORUM WILL	BE ENFORCED.	13.0	877
	CITY COU	Le if	1	
I wish to speak before the	<u> </u>			
	Name of City Agency, De	epartment, Committee or (Council	
				•
Do you wish to provide general		k for or against a proposa	I on the agenda	? (For proposal
Name: Four KRU	ecre	-		() Against proposal () General comments
Business or Organization Affiliat	ion: MDPA			
Address: 100 WILLHII Street Business phone: 310.343	CE BUD # 1600	SANGE MONICE	- CA-	90401
Street		City	State	Zip
Business phone: 310.343	<u>.৭৬53</u> Representing:	APPLICANT		
CHECK HERE IF YOU ARE				ow:
Client Name:				Phone #:
Client Address:		Oit.	Chata	72
Street		City	State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date		TY COUNCIL'S RULE RUM WILL BE ENFOR		Council File I	No., Agenda Item, or Case No.
I wish to speak before the	CITY	1 LOUNCIL			
·	Name of City	Agency, Department,	Committee or C	ouncil	
Do you wish to provide ge		or to speak for or aga	inst a proposal	on the agend	la?()For proposal ()Against proposal
Name: Ji ~	Kirs				() General comments
Business or Organization	Affiliation:	A16 LAWSON) + co, 6	66	
Address: 875 Street			•		9003 4 Zip
Street Business phone: (310) 4					Zip
CHECK HERE IF YOU					Low:
Client Name: M.	DAULD PAU	·	Westername		Phone #:
Client Address:	D WILSHIRK	BLUD # 1	1600 50	n CA	90406

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Date S S I wish to speak bef		THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Lame of City Agency, Department, Committee of City Agency, City Agenc	10	., Agenda Item, or Case No.
Name:	u Ga	ic comment, or to speak for or against a propo		
Address:				
Address:	Street	City	State	Zip
Business phone:		Representing:	***************************************	
CHECK HERE IF	YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELC	ow:
Client Name:			P	hone #:
Client Address:		City	State	Zip

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Date 8-28-13	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 Council				
Do you wish to provide general p	public comment, or to speak for or against a propo	sal on the agenda	?()For proposal ()Against proposal	
Name: ARNOC	D SAEAS		() General comments	
Business or Organization Affiliation	on:			
Address:	Lemax			
Address:Street	City	State	Zip	
Business phone:	Representing:		processing.	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	ow:	
Client Name:			Phone #:	
Client Address:Street	City	State	Zip	

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Date	THE CITY COUNCIL'S RU DECORUM WILL BE ENF		Council File No., Ag	enda Item, or Case No.
I wish to speak before the	CITY COUNC		ouncil .	
T=0//	Name of City Agency, Department outlic comment, or to speak for or a SALOESOL	•		For proposal) Against proposal) General comments
Business or Organization Affiliati	ion: MB 2000			G
Address: 16/3 0 0 Street	ENTORA BLVD City 77917 Representing:	ENCINO	State	7/403 Zip
	A PAID SPEAKER AND PROVIDE			
Client Name:			Phon	e #:
Client Address:	Citv		State	Zip

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Date	THE CITY COUNCIL'S	RULES OF		o., Agenda Item, or Case No.
8-28-2013	DECORUM WILL BE E	NFORCED.	3-08=	17/10
	٠	<u> </u>		
I wish to speak before the	-ity Council		••	
	Name of City Agency, Departm	ient, Committee or Coi	uncil	
Do you wish to provide general p	public comment, or to speak for c	or against a proposal or	n the agenda	n? (√) For proposal () Against proposal
Name: NOONEH KR	ADTIAN			() General comments
Business or Organization Affiliati	on:			
Address: 4735 Sepulv	eda Blvd #406 Sh	erman Oaks	CA	91403
Business phone: 300 q5	eda $BVd # 406 Sh$ City Representing:		State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVI	DE CLIENT INFORM	ATION BEL	ow:
Client Name:		A-A		Phone #:
Client Address:				
Street	City		State	Zip

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Date	THE CITY COUNCIL'S RULI	ES OF	ile No., Agenda Item, or Case No.
7 28 2013	DECORUM WILL BE ENFO	RCEDE/PL 13	08769.
I wish to speak before the	COUNCIL ITA	n#10. 13	087651
	Name of City Agency, Department,	Committee or Council	
Do you wish to provide general purposes. Name: DENISE OV Business or Organization Affiliation		ainst a proposal on the age	enda? () For proposal Against proposal () General comments
Address: 5840 Be	nner St # 308	LA CA	90042
Street Business phone: 323 513	City Representing:	State	Zip
•	PAID SPEAKER AND PROVIDE (CLIENT INFORMATION E	BELOW:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 8 28 2013 I wish to speak before the	THE CITY COUNCIL'S RUI DECORUM WILL BE ENFO		cil File No., Agenda Item, or Case N 0876 \$1 6876 \$1	No.
	Name of City Agency, Department	, Committee or Council		
Name: Lis A	oublic comment, or to speak for or account of the property of		Against propose () General comme	
	Echo SA. L.A			
Business phone: 323 295	City Representing:	/ Sta	ate Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORMATION	N BELOW:	
Client Name:			Phone #:	
Client Address:	City	Sta	ste 7in	

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Date	THE CITY COUNCIL'S	RULES OF 🗸 🖟		., Agenda Item, or Case No.
	DECORUM WILL BE EI	NFORCED. Hew	13-0	\$76 (SI)
	1			
I wish to speak before the	City Caracil			
	Name of City Agency, Departm	ient, Committee or 0	Council	
Do you wish to provide general	public comment, or to speak for c	or against a proposai	l on the agenda	
Name:	KOSAS			(Against proposal () General comments
Business or Organization Affiliat	tion: Triends of	Hoghlad	Parle	
Address: 5300 N	. FIGUETOA SL. City			
Street	City		State	Zip
Business phone: 323 - 62	<i>₩</i> Representing:			
•	A PAID SPEAKER AND PROVI	DE CLIENT INFOR	MATION BELO	ow:
Client Name:			F	hone #:
Olionat Andreas				
Client Address:	City		State	Zip

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Date	THE CITY C	OUNCIL'S RUL	S OF	Council File N	No., Agenda Item, or Case No.
	DECORUM V	WILL BE ENFO	RCED I TOW	13-00	P76
	•		1 <u>y</u> ,		
I wish to speak before the	City	Journal	10		
•	Name of City Agend	cy, Department,	Committee or C	Council	
Do you wish to provide general p	public comment, or to	speak for or aga	ainst a proposal	on the agenc	la?()For proposal 《② Against proposal
Name: 15556 Ko	7505				() General comments
Business or Organization Affiliati	ion: Friend	of Argi	ulad for	ille	hada
Address: Street	FIGUEROA	37-	214	900	042
Business phone: 323-420-				State	Zip
CHECK HERE IF YOU ARE			CLIENT INFOR	MATION BEI	_ow:
Client Name:					Phone #:
Client Address:			***************************************		
Street		City		State	Zip

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Date 8/28/2013 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	//	, Agenda Item, or Case No.
	Name of City Agency, Department, Committee of	r Council	
Name: DAVII	public comment, or to speak for or against a propo ORANKELL ion:		? () For proposal () Against proposal () General comments
Dusiness of Organization / timea			
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELC	DW: hone #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY	COUNCIL'S RULES O	F	Council Fife	e No., Agenda Item, or Case No.
8-28-2013	DECORUM WILL BE ENFORCED.			10	
I wish to speak before the	City Cour				
	Name of City Age	ncy, Department, Com	mittee or Co	ouncil	
Do you wish to provide general p	oublic comment, or t	o speak for or against	a proposal o	on the ager	nda? () For proposal
				-	(A) Against proposal
Name: DAVID GARFA	NALE				() General comments
Arriv	TA 12 24 A.	PROPERTY	DWMERS	A.CCOC	VATTON
Business or Organization Affiliati	on: 14/ConvA	[/COP/6 / V /			
Address: 6 ° 73 CAL	UN AVE	TARZANA	C	4-	91356
Street		City		State	Zip
Business phone: 818 88	/- 63/8 Represe	enting: TARZANA-P	POPPERTY	DUNEAS	ASJOCIATION
•	•	-			
CHECK HERE IF YOU ARE A	PAID SPEAKER	AND PROVIDE CLIEI	NT INFORM	IATION BI	ELOW: L
Client Name:					_ Phone #:
JIIGHT IVALLIO.		***************************************			TOTAL TIME
Client Address:					
Street		City		State	Zip

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D-1-			Council File No. A	conda Homas Cons No.
Date		THE CITY COUNCIL'S RULES OF		genda Item, or Case No.
8-28-13	ら	DECORUM WILL BE ENFORCED.	15)
I wish to speak before	the	Cornar		
•		Name of City Agency, Department, Committee or Council		
•	A	omment, or to speak for or against a pro	oposal on the agenda?	() For proposal () Against proposal
Name:	Arraco	DACAS		() General comments
Business or Organizat	ion Affiliation:			***************************************
Address:		lennox		
Address:s	treet	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF YO	OU ARE A PAID	SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW	/: <u> </u>
Client Name:			Pho	one #:
Client Address:s		O!	Chah	
S	treet	City	State	Zip

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Date THE CITY COUNCIL'S RULES OF Council File No., Agenda Item, or Case	No.
28 Aug 13 DECORUM WILL BE ENFORCED.	٧٠.
I wish to speak before the	
Name of City Agen∳y, Department, Committee or Council	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () Against proposal () Against proposal () General comment.	
Business or Organization Affiliation:	
Address: 14117 CHAWLER B SHERMAN OAK CA 91461	
Address: 1417 CHAW ER B. SHERMAN OAK OA 9140/ Street Street Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	AAAAAAA
Client Name: Phone #:	
Client Address: Street City State Zip	

LAN RECUESTING & MINUTES. THIS IS WITHIN SONG. CITY)F LOS ANGELES SPEAKER ARD

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EACEPITOT	HE EXICIVI NECESSANI	FOR THE FRES	DING OFFICER	10 CALL OF O	4 100		
Date 8-28-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.				Agenda Item, or Case No.		
I wish to speak before the							
	name of the Ry Agency,	Department, Co	mmiliee or Co	uncii			
Do you wish to provide general powers. Name: RONALD	oublic comment, or to sp	eak for or again	st a proposal o	n the agenda?	() Against proposal		
Name: Name:					() General comments		
Business or Organization Affiliati Address:	on: SHERMAN	OAKS	NEIGH	300 HOOD	COUPCIL		
Address: PO BOX 3	56686 5	Hisknew	DAKS	CA	91413		
Street		City	. with	State	* Zip		
Business phone:	Representin	g: <u>50</u> /	VC				
CHECK HERE IF YOU ARE A				ATION BELO	v:		
Client Name:				Ph	one #:		
Client Address:							
Street		City		State	Zip		

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Date	THE CITY COUNCIL'S RUL		cil File No., Agenda Iter			
AUG 28, 2013	DECORUM WILL BE ENFO	RCED. CF	13-0877	lten/0		
I wish to speak before theCOUNCIL						
	Name of City Agency, Department,	Committee or Council				
Do you wish to provide general p	oublic comment, or to speak for or ag	ainst a proposal on the	agenda? () For p	roposal nst proposal		
Name: BRAD T	TORGON			eral comments		
Business or Organization Affiliati	on:					
Address: 927	KINGS RD # 220	WEST HOLLYW	JOD CA	90069		
Business phone: 323 574 :	KINGS RD # 220 City Representing: Appe	ellant / Sc	TE ZIP			
	A PAID SPEAKER AND PROVIDE					
Client Name:			Phone #:			
Client Address:						
Street	City	Sta	te Zip			

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28 Aug 13	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORC	•	e No., Agenda Item, or Case No.
I wish to speak before the		sel	
	Name of City Agency, Department, Co	mmittee or Council	
Do you wish to provide general polynome:	oublic comment, or to speak for or agains	st a proposal on the age	() Against proposal
Business or Organization Affiliati	on:		
Address: 1417 C	HANNER BL SHERN	nou oski e	a grapi
Business phone: \$18-784	-9495 Representing:	State	Zip
	A PAID SPEAKER AND PROVIDE CLI	ENT INFORMATION B	ELOW:
Client Name:			_ Phone #:
Client Address:	Citv	State	Zin

I AM REQUESTING THINOTOS THIS IS WITHIN SONG BOUNDARIOS

CITY F LOS ANGELES SPEAKER ARD

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EYCERT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

EXCEPT TO T	HE EXTENT NECESSARY FOR THE PRE	SIDING OFFICER TO CALL	JPON YOU
Date 8-28+13	THE CITY COUNCIL'S RULE: DECORUM WILL BE ENFOR	3 0.	No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, C	ommittee or Council	
Do you wish to provide general p	public comment, or to speak for or again	nst a proposal on the agen	da? (X) For proposal
Name: RONACD	ZIF		() Against proposal () General comments
Business or Organization Affiliati	on: SHERMAN GAKS N	1316HBURHOOD	
Address: PO BOO	56686 SHerrard City Representing: SC	OHS CA	91413 7in
Business phone:	Representing: 56) NC	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE C	IENT INFORMATION BE	LOW:
Client Name:			Phone #:
Client Address: Street	City	State	Zip

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Date 28, 2013	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. CF 13-0877 Then 8
I wish to speak before the		
·	Name of City Agency, Department, Committed	e or Council
Do you wish to provide general Name: BRAD TORG	public comment, or to speak for or against a pro	posal on the agenda? () For proposal Against proposal () General comments
Business or Organization Affiliati		
Address: 927 Ki	NGS RD # 220 WEST HOUSE	2007 CA 90069
Business phone:	NGS RD #220 WEST HOUSE City S.O. R. S. E	(Appellant)
	A PAID SPEAKER AND PROVIDE CLIENT IN	
Client Name:		Phone #:
Client Address:	City	State Zip
	/	— and a second

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Date 8 28 13	THE CITY COUNCIL'S RUI DECORUM WILL BE ENFO		e No., Agenda Item, or Case No.
I wish to speak before the	LA City Council	<u> </u>	
	Name of City Agency, Department		1.0 () []
Do you wish to provide general p	public comment, or to speak for or ag	gainst a proposal on the age	
Name: Jaime Ro	105, Jr.		() Against proposal () General comments
Business or Organization Affiliati	ion: Sherman Oaks	Homeowners ASS	sociation
Address: 4107 Hagn	olia Ave Burbank	CA	91505
Business phone: 818)450-	2274 Representing: SOH	State	Zip

CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION B	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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EACEPTIO	HE CATENT NECESSANT F	'Un incrne	SIDING OFFICEN	IO CALL C	PON YOU	
Date	THE CITY COUN	ICIL'S RULE	SOF	Council File	No., Agenda Item, or Case No.	
8/28/13	DECORUM WILL	BE ENFOR	CED.	8 45 30		
I wish to speak before the	ty Council			•••		
	'Name of City Agency, D	epartment, (Committee or Cou	incil		
Do you wish to provide general		ak for or aga	inst a proposal or	the agend	da? (X) For proposal () Against proposal () General comments	
Name: David Goldb.	<u>erj</u>				() deficial comments	
Business or Organization Affiliat	ion: <u>Avmbruster Go</u>	ldsmith a	Delvac LC	<u> </u>		
Address: 11611 Sen Viente	blud, Soite 900	LA	**************************************	CA	90049	
Address: NoN Street Business phone: (310) 209	Representing:	City M. David	Paul (Appli	State canf)	Zip	
CHECK HERE IF YOU ARE			·		LOW: X	
Client Name: M. David Pa	u[Phone #:(310) 393-965	
Client Address: 100 Wilshir	e Blud -, Surte 1600	Santa City	Monica	CA State	90401 Zip	
					•	

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Date 8-28-13	THE CITY COUNCIL'S REDECORUM WILL BE ENF		oil File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departme	· · · · · · · · · · · · · · · · · · ·	
Do you wish to provide general [public comment, or to speak for or	against a proposal on the	agenda? (For proposal
Name:	COMER		() Against proposal () General comments
Business or Organization Affiliati	on: Armbruster	Gold smith	- Delvac
Address: 1611 Sa	n Vicente Blud. #	900 LA, (_
Business phone: 310 20°	7800 Representing: N	1. David Paul	
	A PAID SPEAKER AND PROVIDE		N BELOW:
Client Name:	parid Paul		Phone #:
•	Wilshire BIVD, Ste	1600 Santa	Mouica, Cd 8040

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Date 8 28 /2013	THE CITY COUNCIL'S I		I File No., Agenda Item, or Case No.
I wish to speak before the	ິດວິດ ໄ Name of City Agency, Departm	nent, Committee or Council	
Do you wish to provide general p	public comment, or to speak for o	r against a proposal on the a	
Name: MARSHALL	Loub	Washington and the second and the se	(X) Against proposal () General comments
Business or Organization Affiliati	ion: SHERMEN OR	HOMEOWNE	rs Association
Address: PD. Street	23 SHERWEN City	ORKS CA	914/3 e Zip
	<u>I ᢒ≥≤</u> Representing:		
-	A PAID SPEAKER AND PROVI		BELOW:
Client Name:			Phone #:
Client Address:	City	State	e Zip

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Date	THE CITY C	OUNCIL'S RULES	OF Counc	ncil File No., Agenda Item, or Case No	э.
8128/13	DECORUM	WILL BE ENFORCI	ED. /8	D	
I wish to speak before the(ity Council				
,	Name of City Agen	cy, Department, Co	mmittee or Council		
Do you wish to provide general p Name: <u>Davる Goldbe</u> y		speak for or agains	at a proposal on the	e agenda? (X) For proposal () Against proposa () General commen	
Business or Organization Affiliati	ion: Armbouster	Cooldsmith +	Delvac Luq		
Address: 1/61/ San Vicente & Street	Slud, Suite 900	City	CA.		handerskraderskraderse
Business phone: (36)201-8		-			
	A PAID SPEAKER A				
Client Name: M. David Pa	<u> </u>			Phone #:	***************************************
Client Address: 100 W(Shire Street		Santa Monco	C. Sta	QO40 \ Zip	
Oncor		Oity	Ota.	LIP	

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Date C- 200 17	THE CITY COUNCIL'S	RULES OF	Council File No.	, Agenda Item	ı, or Case No.
8-28-13	DECORUM WILL BE E	1	13-087	77/	10
I wish to speak before the	City Coc	ucil			
,	Name of City Agency, Depart	ment, Committee or Co	ouncil		
Do you wish to provide general p	public comment, or to speak for	or against a proposal of	on the agenda	? (For pr	oposal est proposal
Name:	COMER	·			ral comments
	ion: Armbrus	ter Goldsu	ith ? I	elva	
Address: 1611 Sav	· Vicente Rlud. =	#900 LA	, CA	900	249
Address: 16 11 Sav Street Business phone: 310-209	City	M. Da	State	Zip ار	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name: M Da	wid Paul		P	hone #:	*****
Client Address:Street	lilshive Blud.	Ste 1600	SM,	CA	90401
Sueet	City		Siate	ᆁ	

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

EXCEPTION	HE EATENT NECESSARY FOR TH	1E PRESIDING OFFICER	IO CALL UPU	IN YOU
Date 8/28/2015	THE CITY COUNCIL'S DECORUM WILL BE E	-4-	Council File No.	Menda Item, or Case No.
I wish to speak before the	Name of City Agency, Depart	ment, Committee or Cou	ıncil	
Do you wish to provide general p	oublic comment, or to speak for	or against a proposal or	n the agenda?	() For proposal
Name: MARSHALL	LONG			(X) Against proposal() General comments
Business or Organization Affiliati	on: SLIERMAN	QAKS H	oweoni	JERS ASSOCIATI
Address: P. D. By	5223 SHERN	140 Oprs	State	91413 Zip
Business phone: 8 8 921 8	క్రెంక్ Representing: 💆	OHR		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROV	IDE CLIENT INFORMA	ATION BELO	w:
Client Name:			Ph	none #:
Client Address:				
Street	City		State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

			 	
Date Aug 28, 2013	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO		Council File No., Ac	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Department	Committee or Cour	ncil	
Nama: BOK Ax	oublic comment, or to speak for or ag		•	Against proposal General comments
Business or Organization Affiliation	on: Sherman Oaks 1 Woodelff Road	toneomas Sher	ASSOCI.	tim < CA9140
Business phone: 213-364-	City Representing:		State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE	CLIENT INFORMA	TION BELOW:	
Client Name:			Phor	ne #:
Client Address:Street	City	A.,	State	Zip

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Date	THE CITY COUNCIL'S RUL	S OF Council File	No., Agenda Item, or Case No.
Aug 28, 2013		i	~ 10
I wish to speak before the	City Coons	· \	
·	Name of City Agency, Department,	Committee or Council	
	ublic comment, or to speak for or aga	ainst a proposal on the agen	da? () For proposal Against proposal () General comments
		Homeongows	Association
Address: 4050 We	on: Sheeman Daks oodcliff Road Si	was Daris	(A 9140)
	City 1-7-170 Representing:		Zip
•	PAID SPEAKER AND PROVIDE (LOW:
Client Name:		***************************************	Phone #:
Client Address:	Citv	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
8/28/13	DECORUM WILL BE ENFORCED.	10
I wish to speak before the	Name of City Agency, Department, Committee	ee or Council
		_
Do you wish to provide general	public comment, or to speak for or against a pro	oposal on the agenda? (^) For proposal () Against proposal
Name: Adriana	Fev nandez	() General comments
Business or Organization Affiliati	ion: 5437 Cetros Ave	Sherman Oaks 91411
Address:		
Address:Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 8 28 /13	THE CITY COUNCIL'S DECORUM WILL BE EI	1	Council File N	o., Agenda Item, or Case No.
I wish to speak before the			***************************************	
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Do you wish to provide general	public comment, or to speak for c	or against a proposal	on the agenda	a? K) For proposal
Name: Dovg Arse	:naul+			() Against proposal () General comments —
Business or Organization Affiliat	ion: VICA	444-4		
Address: 5121 Van	· NoysBlud	Shorma	n Oales	91403
Business phone: Street	City Representing:	VICA	State	Zip
	A PAID SPEAKER AND PROVI	DE CLIENT INFORI	MATION BEL	ow:
Client Name:				Phone #:
Client Address:				
Street	City		State	Zip

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Date	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, Committe	e or Council		
	public comment, or to speak for or against a pro	oposal on the agenda? () For proposal () Against proposal		
Name: Ji 📐 🦸	<1RS	() General comments		
Business or Organization Affiliation: CRAIG LAWSON & CO, LLC				
	VENICE BLUD LA,			
Street Business phone: (3/0) ¥38-	-2400 Representing: M, DAUID	State Zip		
*	A PAID SPEAKER AND PROVIDE CLIENT II			
Client Name:	AUIO PAUL	Phone #:		
Client Address: 100 u	MILSHIRE BLUD # 1600	SM, CA 90401		
Street	City	State Zip		

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.				
8/28/13	DECORUM WILL BE ENFORCED.	13.0877.51				
I wish to speak before the	CITY COUNCIL					
	Name of City Agency, Department, Committe	e 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						
		() donated the contract of the				
Business or Organization Affiliati	on: MDPA					
Address: 100 WILSHING	E PLUD. #1600 SARTE M	onics CA 90401				
Business phone: 310.353	E POUR. #1600 SARTE M. City -9653 Representing: APPLICANT	State Zip				
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 1/28/13	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	item#8
	Name of City Agency, Department, Confinities	e or Council
	public comment, or to speak for or against a prop	() Against proposal
Name: E)10+ G	hon	() General comments
Business or Organization Affiliation	on: Home Owners of	ENCINO
Address: 5021 Dea	SMORE AV ENCIND	CA
Business phone: 3/0 650	on: Home Owners of Smore Av Encino 8862Representing: Home O	wers of Encira
	PAID SPEAKER AND PROVIDE CLIENT IN	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 8-28-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.	
I wish to speak before the	\mathcal{L}			
N	lame of City Agency, 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 Business or Organization Affiliation:				
Address:Street	City	State	Zip	
	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:				
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Client Address:	City	State	Zip	
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Date 8/29/13	THE CITY COUND		Council File No පී	., Agenda Item, or Case No.
I wish to speak before the	Cody counc	- 4		
Do you wish to provide general բ	Name of City Agency, Do			2 🖄 For proposal
Name: Dova Aker	lau lt	K for or against a pro	posai on the agenda	() Against proposal () General comments
Business or Organization Affiliati	on: VICA			
Address: 5 2 V Street Business phone: 8 8 9 7	an Nuys Bluc	City	OalCS State	9/403 Zip
Business phone: 818917	8 Representing:	<u>vica</u>		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		······································	P	hone #:
Client Address:Street		City	State	Zip

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Date 8 28 13	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 p Name: <u>Adriana</u> Fa	oublic comment, or to speak for or against a propose		? (<) For proposal () Against proposal () General comments	
Business or Organization Affiliati	on:			
Address: 5437 Cedy	os Ave Sherman Oalcs	CA	91411	
	Representing:	State	ZIR	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		P	hone #:	
Client Address:				
Client Address:Street	City	State	Zip	
Please see reverse of card for	or important information and submit this entire card	to the presiding o	officer or chairperson.	

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				- - -
Date 8/28/13	THE CITY COUNCIL'S RU DECORUM WILL BE ENF	JEEO 01	Council File No., Agenda Item, or Case No.	
I wish to speak before the	CITYCOONCI			
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	public comment, or to speak for or a	against a proposal on	the agenda? () For proposal
Name: ER/C 5x	1LUESOU		() Against proposal) General comments
Business or Organization Affiliati	ion:		***************************************	
Address: 16130 DE	ENTURA BLUD	ENCINO	(A	9/403
Street Business phone: 3/0 6/4	ENTORA BLUD City Pepresenting:	MYSELF	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:			Pho	ne #:
Client Address:				
Street	City		State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No).
8-28-2013	DECORUM WILL BE ENFORCED.	13-0877/8	
I wish to speak before the il \	Villagio Tos cano City C Name of City Agency, Department, Commit	ttee or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a p	proposal on the agenda? (For proposal	ı
Name: NOONEH K	PAITUAS	() Against proposal () General commen	
Business or Organization Affiliati	ion:		
Address: 4735 Sep	ulveda Blud #406	Sherman Oaks, CA 914	<u>0</u> 3
Business phone: 300 9	554 Representing: SELF	Sherman Oaks, CA 914 State	
	A PAID SPEAKER AND PROVIDE CLIENT		
Client Name:		Phone #:	
Client Address:			·········
Street	City	State Zip	

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Date 8/24/2013	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	Cource &	***	
	Name of City Agency, Department, Committee or	Council	
	ublic comment, or to speak for or against a propos		? () For proposal
Name: DAUIK	O RANKELL		() Against proposal General comments
Business or Organization Affiliation	on:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip