## CIT DF LOS ANGELES SPEAKEF ARD 13-1271

NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE.
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  1 Wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  Name of City Agency, Department, Committee	6	Agenda Item, or Case No.	
	iblic comment, or to speak for of against a prope		( ) For proposal	
Name: Juan	Alcala		Against proposal     General comments	
Business or Organization Affiliation	n:			
Address:				
Address: Street	City	State	Zíp	
Business phone:	Representing:		***************************************	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Ph-	one #:	
Client Address:	City	State	Zip	

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			. 014 . 00	_	
Date	THE CITY COUNCIL'S RULES OF	Council File N	lo., Agenda Item, o	Case Mo.	
12/18/2013	DECORUM WILL BE ENFORCED.	13-17	271	(0)	
I wish to speak before the	COORCIL	_	·····		
	Name of City Agency, Department, Committee or	Council			
Do you wish to provide general	public comment, or to speak for or against a proposi		( ) Against p		
Business or Organization Affiliati	ion: OUTRIC-GER F MORTH LEANKERS	ZEST!	aura Rivio	MT	
Address: SA 20	Morth &			9135	
			Zip		
Business phone: 818 4	71-54 ABresenting: VLANEET	<u>l-ac</u>	<u> </u>	<b>&gt;</b>	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:					
Client Name:			Phone #:		
Client Address:					
Street	City	State	Zip		

## CITY OF LOS ANGELES SPEAKER ARD

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	·		
Date 12-18-13	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	سر نحیه	., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	nittee or Council	
	public comment, or to speak for or against a		
Business or Organization Affiliat	ion: Sun Valley Area 455et 3t Sun City	NC CA	9/37
Address: 1121126h	455e 5 767 City	State State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELO	ow:
Client Name:		P	Phone #:
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.	
12-18-2013	DECORUM WILL BI	E ENFORCED.	item 6	
I wish to speak before the	Name of City Agency, Depa	owel	Council	
	Name of Oily Agency, Depa	arment, Committee or C	Journell	
Do you wish to provide general p	oublic comment, or to speak f	or or against a proposal	on the agenda?	
Name: MKE	D' GARA			Against proposal     General comments
Rueinage or Organization Affiliati	on: Sun Valley	AREA Nex	hbseheod	Council
Address: 9301 C	AYUGA AVE	Syw Valley	Ca.	91353
Address: 4301 C Street  Business phone: 813-76	て りもつもも Representing:	Myself "	State	Zip
CHECK HERE IF YOU ARE A				
Client Name:			Pho	one #:
Client Address:				
Street	C	it∨	State	Zìp