| Date: 02/01/2017 | | | Council File No., Agenda Item, or Case Item NO. (21) - 13-1465 | | |
|----------------------------|--|--------------------------------------|---|-----|--|
| I wish to speak before the | e Council | | | | |
| Do you wish to provide ge | eneral public comment, or to speak for c | or against a proposal on the agenda? | General Comment | | |
| Name: Saen | | | | | |
| Business or Organization | Affiliation: | | | | |
| Address: | | | | | |
| | Street | City | State | Zip | |
| Business Phone: | Repres | senting: | | | |
| CHECK HERE IF YOU A | RE A PAID SPEAKER AND PROVIDE | CLIENT INFORMATION BELOW: | | | |
| Client Name: | | | Phone#: | | |
| Client Address: | | | | | |
| | Street | City | State | Zip | |

| ate: 02/01/2017 | | Item NO. (21) - 13-1465 | | |
|----------------------------|---------------------------------------|--------------------------------------|-----------------|-----|
| I wish to speak before the | Council | | | |
| Do you wish to provide get | neral public comment, or to speak for | or against a proposal on the agenda? | General Comment | |
| Name: Juan T One | | | | |
| Business or Organization | Affiliation: | | | |
| Address: | | | | |
| | Street | City | State | Zip |
| Business Phone: | Repro | esenting: | | |
| CHECK HERE IF YOU AR | E A PAID SPEAKER AND PROVIDE | E CLIENT INFORMATION BELOW: | | |
| Client Name: | | | Phone#: | |
| Client Address: | | | | |
| | Street | City | State | Zip |

Council File No., Agenda Item, or Case

| Date: 02/01/2017 | | | Item NO. (21) - 13-1465 | |
|----------------------------|--|--------------------------------------|-------------------------|-----|
| I wish to speak before the | Council | | | |
| Do you wish to provide ge | eneral public comment, or to speak for | or against a proposal on the agenda? | General Comment | |
| Name: Antonia Ra | mirez | | | |
| Business or Organization | Affiliation: | | | |
| Address: | | | | |
| | Street | City | State | Zip |
| Business Phone: | Repre | esenting: | | |
| CHECK HERE IF YOU A | RE A PAID SPEAKER AND PROVIDE | CLIENT INFORMATION BELOW: | | |
| Client Name: | | | Phone#: | |
| Client Address: | | | | |
| | Street | City | State | Zip |

| Date: 02/01/2017 | | Council File No., Agenda Item, or Case | | | |
|----------------------|---|--|-------------------------|-----|--|
| Balo: 02,01,20 | | | Item NO. (21) - 13-1465 | | |
| I wish to speak befo | re the Council | | | | |
| Do you wish to prov | ide general public comment, or to speak for | or against a proposal on the agenda? | General Comment | | |
| Name: Seqnn | | | | | |
| Business or Organiz | zation Affiliation: | | | | |
| Address: | | <u></u> | 01111 | | |
| | Street | City | State | Zip | |
| Business Phone: | Repre | esenting: | | | |
| CHECK HERE IF Y | OU ARE A PAID SPEAKER AND PROVIDE | E CLIENT INFORMATION BELOW: | | | |
| Client Name: | | | Phone#: | | |
| Client Address: | | | | | |
| | Street | City | State | Zip | |