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Date 4/9/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.		
I wish to speak before the	Name of City Agency, Department, Committee or C	CF 13-1624		
Do you wish to provide general put	olic comment, or to speak for or against a proposal	on the agenda? ( ) For proposal ( ) Against proposal		
Name: ChANNA		·		
Business or Organization Affiliation	HURKS			
Address: 795 N	Q12 50 1.0	CQ QXXQ		
	228 Representing:			
CHECK HERE IF YOU ARE A I	PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:		
Client Name:		Phone #:		
Client Address:Street	- City	State Zip		
	important information and submit this entire card to	o the presiding officer or chairperson.		
C	ITY OF LOS ANGELES SPEAKER	CARD		
NOTE: THIS IS YOU ARE NOT I	A PUBLIC DOCUMENT SUBJECT TO POSTING ON T REQUIRED TO PROVIDE PERSONAL INFORMATION EXTENT NECESSARY FOR THE PRESIDING OFFICE	THE CITY'S WEBSITE. IN ORDER TO SPEAK,		
Date / /	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.		
4/9/14	DECORUM WILL BE ENFORCED.	17EM 3		
I wish to speak before the	Name of City Agency, Department, Committee or C	OF 13-1624		
	olic comment, or to speak for or against a proposal			
Address: GOV 150	AND WAY LA	CA 900 290		
Business phone: (323)	3342 Representing: QLRS FID So	State Zip  RANGUE CHACUE		
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  Date  Date  Date  Nar	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  OUSING Brown, Tele- me of City Agency, Department, Committee or Councilians and Councilia	Council File No., Agenda Item, or Case No.		
Do you wish to provide general public  Name:  Business or Organization Affiliation:  Address:  Street  Business phone: 3/0 702 86 9	comment, or to speak for or against a proposal of the comment of t	If on the agenda? A For proposal  ( ) Against proposal ( ) General comments  ( ) When I where  ( ) State Zip		
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:		
Client Name:		Phone #:		
Client Address:Street	City	State Zip		
Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.  CITY OF LOS ANGELES SPEAKER CARD  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  Date  Date  Date  Date  Date  Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  HOUSING Committee	Council File No., Agenda Item for Case No.  13-1629  ee		
Do you wish to provide general public	me of City Agency, Department, Committee or comment, or to speak for or against a proposa			
Business or Organization Affiliation	Ornica Dices II	1 an en o		
	OKANGE PICCE / EF			
	D SPEAKER AND PROVIDE CLIENT INFO			
Client Name:		Phone #:		
Client Address:	City	State Zip		

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Date 4 - 9 - 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	HOSITE CONMITTEE	CF 13-1624		
	Name of City Agency, Department, Committee or C	Council		
Name: JEFF SC	public comment, or to speak for or against a proposa ートトレビート	( ) Against proposal ( ) General comments		
Business or Organization Affiliati	ion: ENTERPRISE COMMUNITY	Parrel		
Address: 600 WILST	41RE BWD #600, LA, Co	90017		
Business phone: 2+3-833	1. P.S. BWD #600, A, Co 3-7988 Representing:	State Zip		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phone #:		
Client Address:	City	State Zip		
	for important information and submit this entire card t	·		
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	CITY OF LOS ANGELES SPEAKER	CARD		
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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.		
4/9/14	DECORUM WILL BE ENFORCED.	Item 3 13-1624		
I wish to speak before the Name 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				
Name.				
Business or Organization Affiliation: Abode Communities				
Address: /O L	3rd St LA, CA	900 (5 State Zip		
Business phone: 213 225	7808 Representing:	·		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phone #:		
Client Address:	City	State Zip		
Street				

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Date 4/9/15	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 C	Committee		
Do you wish to provide general	public comment, or to speak for or against a proposa	I on the agenda? ( /) For proposal ( ) Against proposal ( ) General comments		
Business or Organization Affiliati	ion: Mercy Housing CA			
	nd Ave. Ste 100 for Angeles	CA 90015		
Business phone: 213-743	2-5823 Representing: Marchy How	STATE ZIP		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOF	RMATION BELOW:		
Client Name:	,	Phone #:		
Client Address:Street	City	State Zip		
Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.				
CITY OF LOS ANGELES SPEAKER CARD  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 4/9/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.		
l wish to speak before the	Name of City Agency, Department, Committee or C	CF 13-1624		
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? ( ) For proposal ( ) Against proposal				
Marie. Dill				
Address: 6 Street	1011	norths, of 9005		
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Oli t N		RIVIATION BELOW:		
Client Name:				