Date: 11/28/2017			Council File No., Agenda Item, or Cas Item NO. (7) - 14-0366-		
I wish to speak before the	Council				
Do you wish to provide ge	neral public comment, or to speak for	or against a proposal on the agenda?	Against Proposal		
Name: Doug Haines	6				
Business or Organization	Affiliation:				
Address:			-		
	Street	City	State	Zip	
Business Phone:	Repre	esenting:			
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND PROVIDE	E CLIENT INFORMATION BELOW:			
Client Name:			Phone#:		
Client Address:					
	Street	City	State	Zip	

Date: 11/28/2017

Council File No., Agenda Item, or Case

			Item NO. (7)	- 14-0366-S4
wish to speak before the Cou	uncil			
Do you wish to provide genera	al public comment, or to speak for	or against a proposal on the agenda? G	eneral Comment	
Name: Allison Margolir	1			
Business or Organization Affil	iation:			
Address:				
	Street	City	State	Zip
Business Phone:	Repre	esenting:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				
	Street	City	State	Zip

Date: 11/28/2017

Council File No., Agenda Item, or Case

			Item NO. (7)	- 14-0366-S4
wish to speak before the Cou	uncil			
Do you wish to provide genera	al public comment, or to speak for	or against a proposal on the agenda? G	eneral Comment	
Name: Allison Margolir	1			
Business or Organization Affil	iation:			
Address:				
	Street	City	State	Zip
Business Phone:	Repre	esenting:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				
	Street	City	State	Zip

Date: 11/28/2017			Council File No., Agenda Item, or Case Item NO. (7) - 14-0366-S4		
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: Michael Whit	e				
Business or Organization	Affiliation:				
Address:	<b>-</b>				
	Street	City	State	Zip	
Business Phone:	Repre	esenting:			
CHECK HERE IF YOU AR	RE A PAID SPEAKER AND PROVIDE	E CLIENT INFORMATION BELOW:			
Client Name:			Phone#:		
Client Address:					
	Street	City	State	Zip	

### Date: 11/28/2017

Council File No., Agenda Item, or Case

State

Item NO. (7) - 14-0366-S4

Zip

I wish to speak before the Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? General Comment

Name: Gilbert Mora

Business or Organization Affiliation: Behavioral Health Services, Inc.

Street

Address:	6838 Sunset Blvd		Los Angeles	CA	90028
	Street		City	State	Zip
Business Phone:	3234613161	Representing:			
CHECK HERE IF	YOU ARE A PAID SPEAKER AND	PROVIDE CLIENT I	NFORMATION BELOW:		
Client Name:				_ Phone#:	
Client Address:					

City

Date: 1	1/28/2017		Council File No., Agenda Item, or Case Item NO. (7) - 14-0366-S4	
	speak before the Council			
Do you w	vish to provide general public comment, or to spe	ak for or against a proposal on the agenda?	General Comment	
Name:	Goody			
Business	or Organization Affiliation:			
Address:		<b></b>		
	Street	City	State	Zip
Business	Phone:	Representing:		
CHECK I	HERE IF YOU ARE A PAID SPEAKER AND PRO	OVIDE CLIENT INFORMATION BELOW:		
Client Na	ime:		Phone#:	
Client Ad	ldress:			
	Street	City	State	Zip

Date: 11/28/2017	Council File No., Agenda Item, or Case Item NO. (7) - 14-0366-S4		
I wish to speak before the Council			
Do you wish to provide general public comment, o	or to speak for or against a proposal on the agenda?	General Comment	
Name: 666 Herman			
Business or Organization Affiliation:			
Address:			
Street	City	State	Zip
Business Phone:	Representing:		
CHECK HERE IF YOU ARE A PAID SPEAKER A	ND PROVIDE CLIENT INFORMATION BELOW:		
Client Name:		Phone#:	
Client Address:			
Street	City	State	Zip

Date: 11/28/2017			Council File No., Agenda Item, or Case Item NO. (7) - 14-0366-S4	
I wish to	speak before the Council			
Do you y	wish to provide general public comment, or to s	speak for or against a proposal on the agenda?	General Comment	
Name:	Fonda Cox			
Busines	s or Organization Affiliation:			
Address				
	Street	City	State	Zip
Busines	s Phone:	Representing:		
CHECK	HERE IF YOU ARE A PAID SPEAKER AND F	PROVIDE CLIENT INFORMATION BELOW:		
Client N	ame:		Phone#:	
Client A	ddress:			
	Street	City	State	Zip

Date: 11/28/2017			Council File No., Agenda Item, or C Item NO. (7) - 14-0366		
I wish to speak before the 0	Council				
Do you wish to provide gen	eral public comment, or to speak for	or against a proposal on the agenda?	General Comment		
Name: Liz Banks					
Business or Organization A	ffiliation:				
Address:					
	Street	City	State	Zip	
Business Phone:	Repre	esenting:			
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BELOW:			
Client Name:			Phone#:		
Client Address:					
	Street	City	State	Zip	