THE CITY COUNCIL'S BUILES OF

Council File No., Agenda Item, or Case No.

Date

12-17-17	IM WILL BE ENFORCED	14-036	6-55
I wish to speak before the Name of City Ag	gency, Department, Comm	nittee or Council	
Do you wish to provide general public comment, or	r to speak for or against a	proposal on the agenda?	() For proposal () Against proposal
Name: JANA CATTU			(L) General comments
Business or Organization Affiliation: PaiN	FREE SOCI	ETT OF CA	
Address: 2301 W WASHINGT	TON LOS AN	geles CA	90018
Address: 2301 W WASHINGT Business phone: $30-670-7372$ Represe	city esenting: S VVV	State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER	AND PROVIDE CLIEN	T INFORMATION BELOV	N:
Client Name:		Ph	none #:
Client Address:Street	City	State	Zip

Council File No., Agenda Item, or Case No.

Date

3/22/17	DECORUM WILL BE ENFORCED.	14-0366-55	
I wish to speak before the			
	Name of City Agency, Department, Commit	ttee or Council	
	public comment, or to speak for or against a p	proposal on the agenda? () For proposal () Against proposal	
Name: Matt Garl	and	() General commen	
Business or Organization Affiliat	ion: Central San Pedro NC		
Address:			
Address:Street	City	State Zip	
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	
Street	City	State Zip	

Date 3/20/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	City Had - Tiles	
	Name of City Agency, Department, Committee	ee or Council
1	public comment, or to speak for or against a pro-	oposal on the agenda? () For proposal () Against proposal
Name: New Sco	11	() General comments
Business or Organization Affiliation	on: LUS Angeles Well	Tacss Centr
Address: 4012 Hay	Idule Are 2A CA	90062 7in
Business phone: 710148	1 dule Are 2A CA City W76) 4 Representing: LA W1/1.	huss Courte
	PAID SPEAKER AND PROVIDE CLIENT I	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

THE CITY COUNCIL'S RULES OF

Date

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Council File No., Agenda Item, or Case No.

3-22-17	DECORUM WILL BE ENFORCED	14-0366-5	55
I wish to speak before the		-Riles	
	Name of City Agency, Department, Comm	mittee or Council	
Do you wish to provide general p	ublic comment, or to speak for or against a	a proposal on the agenda? () For proposal	
Name: KRUN	Michael Ke	() Against propos General comme	
Business or Organization Affiliation	on: UCEPY SM	RS	
Address: 804 ±	- CH St FIL.	40021	
Street	City	State Zip	
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BELOW:	
Client Name:		Phone #:	
Client Address: Street	City	State Zip	

	CITY OF LOS ANGELES SPE	AKER CARD	- h341 - SS
Date 3/27/7	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	Council File No., A	agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	nittee or Council	les Committe
	ublic comment, or to speak for or against a		
Name:	SIN EASTMAN		() Against proposal () General comments
Business or Organization Affiliation	on:		
Address:	ON- FILE		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELOW	:
Client Name:		Pho	one #:
Client Address:			
Street	City	State	Zip

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 () A				
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 () A			OF Month 1D	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal () Against propos	I wish to speak before the			onmittee
Name: Downle Andrew () Against proportion of the		tvaile of Oity Agency, Department, Ooi	Timilities of Godfiell	
Name:	Do you wish to provide general p	public comment, or to speak for or agains	t a proposal on the agenda? (
Address: 2729 W. 73 Rd J. L.A C.ity State 2ip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Phone #:	Name: Donnie An	deren	() Against proposal) General comments
Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Business or Organization Affiliation	on: California Min	sorith Allisace	9 ADUR
Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Address: Street	City	State	Zip
Client Name: Phone #:				
	CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BELOW:	:
Client Address	Client Name:		Pho	ne #:
	Client Address:			
Street City State Zip	Street	City	State	Zip

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF THE COUNCIL R
wish to speak before the City Burnel - Pules Committee
Name of City Agency, Department, Committee or Council
lame: //// Old // Old // General comments or to speak for or against a proposal on the agenda? () For proposal () Against proposal () General comments
susiness or Organization Affiliation: California Minority Allianu (SCC)
ddress: 1445 W Pentune LA Ca 90047
Street Strate Zip Strate Zip Strate Zip City Company Company City City Company City
HECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:
lient Name: Phone #:
Street City State Zip

Date 3/22/2017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		No., Agenda Item, or Case No.
			04-
I wish to speak before the Spec	ne of City Agency, Department, Committee or	ection s	
Nar	ne of City Agency, Department, Committee or	Council	
Do you wish to provide general public	comment, or to speak for or against a proposa	I on the agend	da? () For proposal () Against proposal () General comments
	1-0 2111	()	
Business or Organization Affiliation:	LEAF OF LIFE WE live	27	
Address:Street	Leaf of Life Welline No. Hollyword	CB	
Business phone: 818-968-56	Representing:	State	Zip
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT INFOR	MATION BE	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

Council File No., Agenda Item, or Case No.

Date

3/25/17	DECORUM WILL BE ENFORCED.	14-0	9366-	55
I wish to speak before the	Name of City Agency, Department, Committee	ee or Council	cav	
Do you wish to provide general p	public comment, or to speak for or against a pro	oposal on the agend	a? For prop	
Name: M/Chase			7 Against	proposal comments
Business or Organization Affiliati	on:			
Address: 3805 W	1. MARTIN LUTHERKING	The Bull State	L.A. CA.	90008
Business phone: 9493/	80833Representing:			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BEL	.ow:	
Client Name:			Phone #:	
Client Address:	0	0:-1-		
Street	City	State	Zip	

Date 3/12017	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 of	or Council
Do you wish to provide general p	ublic comment, or to speak for or against a propos	sal on the agenda? () For proposal () Against proposal
Name: Sky Skelye	X	(p) General comments
Business or Organization Affiliation	on: Sweetwest	
Address: 15 Box 15	37 Newsort Beach	State 21p4
Business phone: 323-909	-7759 Representing: Cannal Tas	r fore & lot
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

Date 3/24/7	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	ne of City Agency, Department, Committee	or Council
	comment, or to speak for or against a propo	() Against proposal
Name: Chris S	1 Jan	() General comments
Business or Organization Affiliation:		
Address: 330 \\ Street	1 Cahvenga Los,	Ansula Civa Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
Street	Oity	Σίαιθ Ζίμ

3/22/17	THE CITY COUNC		Council File No., A		ase No.
I wish to speak before the	Name of City Agency, De	Intergovern M epartment, Committee	cotal relation	ns & New	ighborhood
Do you wish to provide general p Name: Gilbert Mo		k for or against a prop	osal on the agenda? (() For proposa) Against pro) General con	posal
Business or Organization Affiliation	on: Behavioral	Health Se	ruices, Inc.	9002	
Address: <u>6838</u> 5 un; Street Business phone: (323) 461 - 2	3/6/ Representing:	City Rothinking	Access Mo	Zip	(RAM)
CHECK HERE IF YOU ARE A	PAID SPEAKER AND P	ROVIDE CLIENT IN	FORMATION BELOW		
Client Name:			Pho	ne #:	
Client Address: Street		City	State	Zip	
Please see reverse of card for	or important information an	d submit this entire ca	ard to the presiding office	cer or chairper	rson.

Date 3/22/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theNam	e of City Agency, Department, Committee o	r Council
Name: Tome of		sal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation:	ca Cannabis	tast follo
Address: 3/ Street	Ct Ave Cox Angelo	State Zip
	Representing:	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	PRMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

Date M22	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	e or Council	/
Do you wish to provide general	ublic comment, or to speak for or against a pro	posal on the agenda?	() For proposal () Against proposal
Name:	eight from The	CINO 1	General comments
Business or Organization Affiliation	ın:		
Address: Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW	·
Client Name:		Pho	one #:
Client Address:	Olk	Chala	7:
Street	City	State	Zip

3/22/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	14-0366	enda Item, or Case No.
	Name of City Agency, Department, Committee		
Do you wish to provide general p	oublic comment, or to speak for or against a prop	osal on the agenda? (
Name: Ruben Ho	nia	() Against proposal) General comments
Traine.	JIA (- 11 + 17		
Business or Organization Affiliati	ion: LA CONNOSIS JOSK	Local	
Address:Street	oublic comment, or to speak for or against a proposition:		
Street	City	State	Zip
Business phone:	Representing:	A10-	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:	
Client Name:		Phon	e #:
Client Address:Street	Cib.	Ctoto	7:-
Street	City	State	Zip

THE CITY COUNCIL'S RULES OF

Council File No., Agenda Item, or Case No.

Date

3.22.17

3.22.17		VILL BE ENFORCED.		1403	36655
I wish to speak before the	Name of City Agend	cy, Department, Comm	nittee or Counc	oil	
Do you wish to provide general	public comment, or to	speak for or against a	proposal on th	ne agenda?	
Name: CREY,	HUNT			N.	Against proposal General comments
Business or Organization Affiliat	tion: KIND	THEORY	LLC		
Address:Street		ARINA DEL		CA	90292
		,		State	Zip
Business phone: 619.25	2 4632 Represen	ting:			
CHECK HERE IF YOU ARE	A PAID SPEAKER A	ND PROVIDE CLIEN	T INFORMATI	ON BELOW	v:
Client Name:				Ph	none #:
Client Address:Street		City		State	Zip
		•			

3/22/2017		OUNCIL'S RULES OF VILL BE ENFORCED.		366-85
I wish to speak before the Rules	Name of City Agence	Intergovernmenta cy, Department, Committe	Rejatins, all e or Council	neignbarhoods
Do you wish to provide general pub	lic comment, or to	speak for or against a pro	posal on the agend	a? () For proposal
Name: Melanie To				() Against proposal General comments
Business or Organization Affiliation:	Behavioral	Health services	, me.	
Address: <u>U838 Sunset</u>	Blvd.	LOS Angeles	LA State	90028
Business phone: (323) 4(1-31			State	Σiμ
CHECK HERE IF YOU ARE A P			IFORMATION BEL	.ow:
Client Name:				Phone #:
Client Address:			0.1	7
Street		City	State	Zip

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

NOTE: THIS IS A PUBLIC DOCUMENT.

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 3/22/17	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 of	or Council
	blic comment, or to speak for or against a propo	
Business or Organization Affiliation	Los angeles cann	abis TaskForce
Address: 829 E Street Business phone: 0405992	City Representing:	State Zip
All and the second seco	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

Council File No., Agenda Item, or Case No.

Date

03/22/2017		UNCIL'S RULES OF ILL BE ENFORCED.	14-031	16-S5
I wish to speak before the	Name of City Agency	Department, Committ	Hee or Council	
Do you wish to provide general (roposal on the agenda?	
Name: Zadar	2 Pitts			() Against proposal() General comments
Business or Organization Affiliat	ion: Southern (California Con	litian thAd	elivery alliana
Address: 10153 1/2 Street	Riveride Dr	L A	CA	91602
Business phone:			State	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AN	D PROVIDE CLIENT	INFORMATION BELOW	/:
Client Name:			Pho	one #:
Client Address: Street		City	State	Zip

(CITY OF LOS ANGELES SPEAKE	R CARD	1-0366-SF
Date 3/ 22/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	6	Agenda Item, or Case No.
I wish to speak before the	Spec, Mtg Rules, Election Name of City Agency, Department, Committee of		RYTO
Name: VAHUU	ublic comment, or to speak for or against a propo	sal on the agenda?	() For proposal () Against proposal () General comments
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	w:
Client Name:		PI	none #:
Client Address:	City	State	Zip

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Date 3/55/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Pules Committee Name of City Agency, Department, Committee	or Council
Do you wish to provide general Name:	public comment, or to speak for or against a property	osal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliat	1. (1)	CA 90031
Business phone: 45-8/16	Representing: SKId Row	Neighborhood Council
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW: Committee
Client Name:		Phone #:
Client Address:	City	State Zip

Council File No. Agenda Item or Case No.

Date

3-22.17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	14-036	6-58
I wish to speak before the	Reuls Communities of Name of City Agency, Department, Committee of	or Council	
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda	
Name: Ann M	Call		Against proposal General comments
Business or Organization Affilia	ution: DWAC		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Name:		F	Phone #:
Client Address: Street	City	State	Zip

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 3-22-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Agenda Item, or Case No.
I wish to speak before the			
/)	Name of City Agency, Department, Committee	or Council	
Do you wish to provide genera	al public comment, or to speak for or against a prop	osal on the agenda?	() Against proposal
Name:	1		() General comments
Business or Organization Affilia	ation \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	nrcz	
Address:	/ \		
Street	City	State	Zip
Business phone:	Representing:		
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Client Name:		Ph	one #:
Client Address:			
Street	City	State	Zip

417317011	COUNCIL'S RULES OF WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	ency, Department, Committee or	Council
Do you wish to provide general public comment, or	to speak for or against a proposa	
Name: Lady Cage-Bo		Against proposal () General comments
Business or Organization Affiliation:	N: H.O.P.E .; 3	gueroa Church of Christ
Address: 2656 Thurman	AVE; L.A. CA	FRNA 90016 State Zip
Business phone: (33) 251-5682 Repres	senting: Commun	nty ADVOCATE
CHECK HERE IF YOU ARE A PAID SPEAKER	AND PROVIDE CLIENT INFOR	MATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

	CITY OF LOS ANGELES SPEAK	ER CARD
Date 3/20/17	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	ee or Council
Do you wish to provide general	public comment, or to speak for or against a pro	
Name: Andrea ?	Drymmer	() Against proposal () General comments
	tion: Los Angeles Cannabi	is Task Force
Address:	Los Angeles city	
Street Business phone: 213-840	0-69- Representing: Entrepres	State Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

3-22-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		14-0366-55
I wish to speak before the Nan	me of City Agency, Department, Committee	Tons 4 Neigh Lan	hands GmmlH20
Do you wish to provide general public	comment, or to speak for or against a pro	posal on the agenda	
Name: Charles Porter			() Against proposal () General comments
Business or Organization Affiliation:	VCETT		
Address: Street	6+h St LA	State	9002) Zip
Business phone:	Representing: Ski'D Row (aug Prevention Pr	wram)
	D SPEAKER AND PROVIDE CLIENT II		
Client Name:		P	Phone #:
Client Address:Street	City	State	Zip
	portant information and submit this entire		

Date 3/22/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Agenda Item, or Case No.
I wish to speak before the	Camabis Committee Name of City Agency, Department, Committee		Ounci/
Name:	public comment, or to speak for or against a proposition: Sequeia Wellness	osal on the agenda?	For proposal Against proposal General comments
Address: Street Business phone: (3/0)883	City Sepresenting:	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOV	V:
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip

3-22-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case	
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 proposa	al on the agenda	a? () For proposal () Against proposal () General comments
Business or Organization Affiliat	ion:		
Address:Street	City	State	Zip
Business phone:	Representing:		w
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELO	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

Date 3/22/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	Agenda Item, or Case No.
I wish to speak before the	Elections intergovernment of City Agency, Department, Committee or	del relation	ons to reighborhood
	omment, or to speak for or against a proposa	al on the agenda	
Name: Dahar Hy	inehsaziah		Against proposal General comments
Business or Organization Affiliation:	PayQwick, Inc.		
Address: 23801 Calabase	s Road Calabases	CA	9/302
Business phone: Street	S Road Calabases City City	State	Zip
	SPEAKER AND PROVIDE CLIENT INFO		ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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Date 3/22/17 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Rules, Election Intergover. Name of City Agency, Department, Committee o	15 102 10 montal	Agenda Item, or Case No.
Do you wish to provide general post of the Name:	bublic comment, or to speak for or against a propose on: Pice NC	sal on the agenda?	() For proposal () Against proposal () General comments
Business phone 3 -943 (City City PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Name: Client Address: Street	City	State	Zip

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	VA CITY COUNCIL Name of City Agency, Department, Committee or	r Council	
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agen	
Name: SZYAN Z	ARAGOZA		() Against proposal () General comments
Business or Organization Affiliati	ion: Youth Drug Abuse Prevention	Program	(YDAPP)
Address: 680 S. U	ion: Youth Drug Abuse Prevention Wilton Pl., Los Angeles,	CA	7110 90005 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BE	LOW:
Client Name:			Phone #:
Client Address: Street	City	State	Zip

Council File No., Agenda Item, or Case No.

Date

5/22/17	DECORUM WILL BE ENFORCED.		
I wish to speak before the	A City Council ame of City Agency, Department, Committee	e or Council	
Do you wish to provide general public	c comment, or to speak for or against a pro	posal on the agenda?	
Name: HARI KI	M		() Against proposal General comments
Business or Organization Affiliation: _	CoPALM (Coalition to P	revent Allow Rea	luxed flarms
	LTON PZ HOS ANGELES		
	Representing:		Zip
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELO	w:
Client Name:		PI	hone #:
Client Address: Street	City	State	Zip
Street	City	State	Σip

Date 3/22/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of		rittes
Do you wish to provide general pu	ublic comment, or to speak for or against a propos	al on the agenda	
Name: ALCERT	METENA		() Against proposal (Z) Gene ral comments
Business or Organization Affiliatio	n: SFV PARTNERSHIP		
Address: 1/3/ CE/12	S ST. SAN FERNANDO	CA	9/380
Business phone: (18.554.6)	SAN FERNAND & City Representing: SAN FERNAND &	State VAI/EY DRV	to prevention Prog
	PAID SPEAKER AND PROVIDE CLIENT INFO		
Client Name:			Phone #:
Client Address:Street	City	State	Zip
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3-22-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committ	ee or Council	6-55
	olic comment, or to speak for or against a pr	oposal on the agenda?	
Name: Name 9	Coyol		Against proposal General comments
Business or Organization Affiliation	:		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW	7:
Client Name:		Pho	one #:
Client Address: Street	Olt	01-1	7:
Street	City	State	Zip

THE CITY COUNCIL'S RULES OF

Council File No., Agenda Item, or Case No.

Date

3.22.2017

	DECORUM W	ILL BE ENFORCED.		
I wish to speak before the	LA City	Council	mauch	22, 2017
	Name of City Agency	y, Department, Comm	ittee or Council	
Do you wish to provide general p Name:Roseauい		peak for or against a	proposal on the agenda	(? (火) For proposal () Against proposal () General comments
Business or Organization Affiliation	on: LA NOI	2 41		
Address: 8749 H	olloway	W Hollywood	od, CA	90069
Address: 8749 H Street Business phone: 310 654	Representi	ng: LAW office	+ of Bruce	margolin
CHECK HERE IF YOU ARE A				
Client Name:			F	Phone #:
Client Address:Street		City	State	Zip

Date 3-22-17	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	e or Council	
Do you wish to provide general p	public comment, or to speak for or against a prop	oosal on the agenda? () For prop	posal
Name: March	y Wilcher	() Agains	t proposal Il comments
Business or Organization Affiliati	ion: Descript dispense	y Dwner	
Address: 1660 A	1. Willow PL LO D	state Zip	8500
Business phone: 323-5	,	State Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:			
Street	City	State Zip	

Date 3/22/17	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	
	public comment, or to speak for or against a proposa	1) For proposal) Against proposal) General comments
Business or Organization Affiliat	ion:		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW:	
Client Name:		Phor	ne #:
Client Address: Street	City	State	Zip

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Date 3/22/17	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 public comment, or to speak for or against a proposal on the agenda? () For proposal				
Name: Harmony	Raymond	() Against proposal) General comments	
Business or Organization Affiliat	ion: 4-1 5/00M			
Street	minica Brid West 1/0/1	State	904 96030 Zip	
Business phone: 469 933	2590 Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Phon	e #:	
Client Address:Street	City	State	Zip	
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Date 6) 22 / 10	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 o	al - Pole	S	
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenda?	() For proposal	
Name: TANOGY	DANTER		Against proposal General comments	
Business or Organization Affiliati	on:			
Address: P.D.	BOX 660216 AACADIA	Co		
Street	City	State	Zip	
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:				
Client Address:				
Street	City	State	Zip	