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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. I'4-0588 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? Of and a transfer to the transfer to	
I wish to speak before the APA Aging & Rever Committee 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? Against pro	ase No.
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? Against proposal or the agenda?	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda?	
Against pro	
	oposal
Business or Organization Affiliation: <u>Sienna Club</u>	
Address: 4135 Benedich Cyn De - Sy Date CIA 91423	
Business phone: Representing: State Zip Verdiegs Hell	9
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	
Client Name:	
Client Address: Street City State Zip	



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Date 08-11-14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	A PHAN WILL Name of City Agency, Department, Committee of	r Council
Do you wish to provide general p	public comment, or to speak for or against a propos	,
	ion: SIERRA CUMB ANDERES CHAPT	The
	IN AVE, NONTH HOLLYWOOD	
	Representing: Sigus Cult	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	r Council	
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenda	? (≭) For proposal
· · · · · · · · · · · · · · · · · · ·	troubridge		Against proposal General comments
Business or Organization Affiliati	ion: Sierra Club		
Address:	Burbank		91501
		State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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Date 8 11 114		INCIL'S RULES OF LL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the		Department, Committee	or Council	· · · · · · · · · · · · · · · · · · ·
Do you wish to provide general p	public comment, or to sp	eak for or against a prop	oosal on the ager	ida? (🕠 For proposal
Name: Focion Ale				() Against proposal () General comments
Business or Organization Affiliati	ion: Sierra Cl	ub		
Address: 837 N	Parish DI	Burbours	State	91506 Zip
Business phone:	Representir	g:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AN	PROVIDE CLIENT IN	IFORMATION BI	ELOW:
Client Name:				Phone #:
Client Address:		City	State	Zip



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Date 3 11 114	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, Committ	tee or Council VFUR THE APPEA
Do you wish to provide general pub	olic comment, or to speak for or against a p	roposal on the agenda? () For proposal
Name: LUCINOA		() Against proposal () General comments
Business or Organization Affiliation:	FRIENDS OF 6	RIFFITH PARK
Address: P D BOP Street	27573 LA	State Zip
Business phone:	Representing: THENOS	OF GRIFFITH PARK
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
Street	City	State Zip

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Date Aug 11, 2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
	PHAR CommiTTED	
Na	me of City Agency, Department, Committee or	Council
Do you wish to provide general public	comment, or to speak for or against a proposa	al on the agenda? For proposal () Against proposal () General comments
Business or Organization Affiliation:		
Address: 12551 PRG	SNELL ST 21	cr 90066
Street	City	State Zip
Business phone:	Representing: 5, e1/9 C	
	ID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:		<u> </u>
Street	City	State Zip



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aug 11, 2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	14-058	., Agenda Item, or Case No.
I wish to speak before the	ARTS PARKS HEALTS Name of City Agency, Department, Commit	H #AGING // tee or Council	Piver Committee
Do you wish to provide general	public comment, or to speak for or against a p	proposal on the agenda	? (X) For proposal () Against proposal
Name: Al Mogo	10		() General comments
Business or Organization Affiliati	ion: Friend of Griffilh P	Park & Siego	Cluf
	S, luer Lake Drive, LA		
	1530 Representing:		Zip
	A PAID SPEAKER AND PROVIDE CLIENT		ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip



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Pate 8/11/14		UNCIL'S RULES OF ILL BE ENFORCED.		o., Agenda Item, or Case No.	
wish to speak before theA	RTS, PARKS, A.G. Name of City Agency	LING AND PUB y, Department, Committ	R COMH- ee or Council		
Do you wish to provide general p	oublic comment, or to s	speak for or against a professional (For	roposal on the agenda THE APPEAL)	a? (X) For proposal () Against proposal () General comment	ts
Name of City Agency, Department, Committee or Council you wish to provide general public comment, or to speak for or against a proposal on the agenda? (X) For proposal me:					
Address: 4350 TRO Street Business phone: 81876	OST AVE	STUDIO CUTS City ina:	State	91604 Zip	_
				ow:	
Client Name:				Phone #:	
Client Address:Street		City	State	Zip	_



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		_		
Date & II//	THE CITY COUNCIL' DECORUM WILL BE	S RULES OF ENFORCED.	Council File No., Ager	nda Item, or Case No.
I wish to speak before the		the Asing & F		ce
Do you wish to provide general	Name of City Agency, Department or to speak to) For proposal
Mis. B	OMen -	Tor against a proposal	Torr the agenda!	Against proposal General comments
Business or Organization Affiliat	ion; US Felix led	gel-	A	gainst Appeal
Address: 4459	Λ	F, CA 90	1027	
Business phone: 313-191	Ci -1340 Representing:	los flir led	State	Zip
CHECK HERE IF YOU ARE			RMATION BELOW:	
Client Name:			Phone	ə #:
Client Address:	Ci	itv	State	Zip

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THE CITY COUNCIL'S RULES OF

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

Date

8/11/14	DECORUM W	ILL BE ENFORCED.	14-0588	(2)		
I wish to speak before the	to farks Co	mmittee)				
		y, Department, Committee or	Council	Jupporting		
Do you wish to provide general p	oublic comment, or to s	speak for or against a proposa	I on the agenda?	For proposal () Against proposal		
Name: Michelle Blac	b			() General comments		
Business or Organization Affiliati	on: Charton - B	row + Constant / on	behalf of the	pellant J		
Address: 2200 PCH#3		Hermon Beach		90254 Zip 7		
		•		Zip 🔾 T		
Business phone: 310.777.		•	RMATION BELOV	N· V		
Client Name: Theody of			Ph	one #:		
Client Address: F.O. 6ck 2	7573	4	40	90027		
Street		City	State	Zip		



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Date & I. I.	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		No., Agenda Item, or Case No.
8/11/2014	DECORUM WILL BE ENFORCED	19.	-0588
I wish to speak before the	Arts, Parks Committ	6 6	
	Name of City Agency, Department, Comr	mittee or Council	
	public comment, or to speak for or against a	a proposal on the agend	() Against proposal
Name: Gerry Ha	ns		() General comments
	ion: Friends of Griffith	Park	
Address: 1624 Green	Oak Pl LA-	CA State	50068
	3757 Representing: Fo GP	State	Zip
	A PAID SPEAKER AND PROVIDE CLIEN	NT INFORMATION BE	I OW-
OHEOR HERE II 100 ARE A	TAID OF EARCH AND THOUBE OFFE	TI INI OTHINATION DE	
Client Name:			Phone #:
Client Address:	0.1		
Street	City	State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

8-11-14	THE CITY COUNC			ouncil File No., Ag	genda Item, or Case No.
I wish to speak before the	Name of City Agency, De	PANKS epartment, Comm	nittee or Coun	cil	
Do you wish to provide general p	oublic comment, or to speal				A PPEAL For proposal Against proposal General comments
Business or Organization Affiliati	on: BEACHWOOD	CANGON	1061418	orhood 90	ASSOCIATION
Address: 3/10 D Street Business phone: 34 463	97/19	City		State	Zip
CHECK HERE IF YOU ARE A			IT INFORMAT	TION BELOW	:
Client Name:		-	+2	Pho	ne #:
Client Address:Street		City		State	Zip



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9/11/14		COUNCIL'S RULES OF I WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Arts Park	's Committee		
•	Name of City Age	ency, Department, Committe	e or Council	I For the Appeal.
Do you wish to provide general Name:		to speak for or against a pro	oposal on the agenda?	() For proposal () Against proposal () General comments
Business or Organization Affiliat	ion: Friend	's of Griffith Park	2	
Address: 2624 Green	N OAK Pl.	LA	CA	90068
Street		City	State	Zip
Business phone:	Repres	enting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT I	NFORMATION BELO	w:
Client Name:			P	hone #:
Client Address:				
Street		City	State	Zip



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Date # - 1 [- 14	THE CITY COUNCIL'S RI DECORUM WILL BE ENF			., Agenda Item, or Case No D 588
I wish to speak before the	Manager Manager Department	nt, Committee or Co	ouncil	X for appeal
Do you wish to provide general p	oublic comment, or to speak for or	against a proposal	on the agenda	? () For proposal
Name: Marian I	Dodge			() Against proposal () General comments -
Business or Organization Affiliati	on: Friends of C	iri Ffith F	ark_	
	27573, LA			90027 Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVID	E CLIENT INFORM	MATION BEL	ow:
Client Name:			F	Phone #:
Client Address:				
Street	City		State	Zip

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Date		UNCIL'S RULES OF ILL BE ENFORCED.	Council File No., Ag	genda Item, or Case No.
I wish to speak before the				
Na	me of City Agency	, Department, Committee o	r Council	
Do you wish to provide general public	comment, or to s	peak for or against a propos	sal on the agenda?() Against proposal
Name:			() General comments
Business or Organization Affiliation:	1			
Address:Street		6::	0	
Street	ν	City	State	Zip
Business phone:	Representi	ng:		
CHECK HERE IF YOU ARE A PA	D SPEAKER AN	ID PROVIDE CLIENT INFO	ORMATION BELOW	:
Client Name:			Pho	ne #:
Client Address:				
Street		City	State	Zip

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Date		NCIL'S RULES OF	Council File No.,	, Agenda Item, or Case No.
Sug 11,2014	DECORUM WIL	L BE ENFORCED.	4-05	88
I wish to speak before the	Name of City Agency,	Department, Committee	er Commy or Council	TEE
Do you wish to provide general p	public comment, or to spe	eak for or against a propo	osal on the agenda?	? () For proposal
Name: AHHE	1 10) Lp		() Against proposal () General comments
Business or Organization Affiliation	on: Self			
Address: 3234 E	Hrick St.	Les Engle	s CA	90027
Business phone: 323 449			State	Zip •
CHECK HERE IF YOU ARE A			FORMATION BELO	ow:
Client Name:			P	hone #:
Client Address:				·
Street		City	State	Zip

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Date	THE CITY COUNCIL'S RULE	3 0 -	File No., Agenda item	
11 AUG 2014	DECORUM WILL BE ENFOR	CED.	0588 - #	2
I wish to speak before the	ARTS PARES HEALT Name of City Agency, Department, C	H AGING &	RIVER	COMMITTE
Do you wish to provide general	public comment, or to speak for or agai	nst a proposal on the aç	genda? () For pr	oposal
Name: MARK	F. MAUCERI		(X) Again () Gene	st proposal ral comments
Business or Organization Affiliat	ion: LOS FELIZ NEIG	HBORHOOD (COUNCIL	
Address: 1965 N. I	ALLIHURST, L.A. CE	9002	7	
	,		Zip	
Business phone: (323) 93	5-6 900 Representing: LO	2 EEris		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE C	LIENT INFORMATION	BELOW:	
Client Name:			Phone #:	
Client Address:				
Street	City	State	Zip	

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Date 8/11/1/	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	2 (14-05	nda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Commi	g RiVV	36
Do you wish to provide general p	oublic comment, or to speak for or against a	proposal on the agenda? (*(*)) For proposal) Against proposal) General comments
Business or Organization Affiliati	on:		
Address: 1317 All	esarelio St, #1 Los F	Fugeler CA	900 26
	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	T INFORMATION BELOW:	
Client Name:		Phone	e #:
Client Address: Street	City	State	Zip

14-0588

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Date 71119	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
Name: William C S (sal on the agenda? () For proposal Against proposal General comments
2252	Dosano Cana LA Ca 900	State Zip
	- 3/25 Heresenting: Dr. Scan A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:		Phone #:
Client Address:Street	City	State Zip

14-0588

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8-11.2014	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 p	public comment, or to speak for or against a prope	
Business or Organization Affiliati	on: Los Feliz Neighbor	hood Council
Address:Street	City	State Zip
	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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8/11/10/4	THE CITY COUNCIL'S DECORUM WILL BE E	RULES OF Cou NFORCED.	uncil File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departm	gent Committee or Council	12M 2
Do you wish to provide generally			
Name: WAYMW	-04/54	a see Colonia	Against proposal () General comments
Business or Organization Affiliation	on: New 29	Brylith	000/
Address:	MANAY COLITY	GUNGAL ,	State Zip
Business phone: 016 54	Pepresenting:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROV	DE CLIENT INFORMATION	ON BELOW:
Client Name:			Phone #:
Client Address:Street	City		State Zip

ABSENT OF

CITY OF LOS ANGELES SPEAKER CARD

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Date S	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee or	Council File No., Agenda Item, or Case No.
Do you wish to provide general Name:	oublic comment, or to speak for or against a propos	cal on the agenda? () For proposal () Against proposal () General comments
/	4 GRIFFITH BIU	
•	Representing: A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:	City	Phone #: State Zip



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Date Silling	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	VS Jahr) Rec & A	3
ſ	Name of City Agency, Department, Committee or	Souncil XFor Apres 1
Do you wish to provide general pub	olic comment, or to speak for or against a proposa	al on the agenda? () For proposal () Against proposal
Name: Lasca Hor	wl	() General comments
	A Kestral Bich :	T TOMO
Address: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Nerdison Site C	A State Zip
Business phone: 323 - (66)	2-45/3 Representing:	
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip