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Date 4-13-16	THE CITY COUNCIL'S DECORUM WILL BE E		Council File No., Age	enda Item, or Case No.
I wish to speak before the	Howeless ness Name of City Agency, Departi	ment, Committee or C	ouncil/	mittee
Do you wish to provide general	I public comment, or to speak for	or against a proposal	on the agenda? (For proposal
Name: Ann SE	-W/LL		() Against proposal) General comments
Business or Organization Affilia	ation: California	Commo	nity Fo	ordation
	gue con grife 40		Ples CA State	90012 Zip
Business phone: 213 453	6267 Representing: \$	A-		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROV	TIDE CLIENT INFOR	MATION BELOW:	
Client Name:	5#5		Phon	e #;
Client Address:	City		State	Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	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 gen	neral public comment, or to speak for or against a prop	osal on the agenc	la? For proposal () Against proposal () General comments
Business or Organization A	N. A.	lousing	
Address: Street	(3) lankershim	State	91605 Zip
Business phone:	Representing:		
	ARE A PAID SPEAKER AND PROVIDE CLIENT IN		LOW:
Client Name:			Phone #:
Client Address:Street		State	Zip

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Date 4) 13)16	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO	120 01	rile No., Agenda Item, or Case No.
	Come lescress ame of City Agency, Department,		Cente.
Do you wish to provide general publi	c comment, or to speak for or ag	ainst a proposal on the ag	enda? (🗡) For proposal
Name: Jerry J			() Against proposal () General comments
Business or Organization Affiliation:		Cow Cen	ter
Address: 1309 8 2	4n 87. LA	State	90021
Address: 1309992 Street Business phone: $213891-3$	2880 Representing:	State	Σιμ
CHECK HERE IF YOU ARE A PA			BELOW:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 4/145/16	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 or		Hee
Do you wish to provide general p	public comment, or to speak for or against a propos	al on the agenda	? () For proposal
Name: EVIC Aves			() Against proposal () General comments
	on: Los Angeles Commy of Ac	fron Ne	took
Address: 838 E 6 6 6 6 Street	1 St Cs Arge les	C A State	1002/ Zip
Business phone:	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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Date 4 13 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Homelessness and Poverty Com- Name of City Agency, Department, Committee	nittee ee or Council
Do you wish to provide general	I public comment, or to speak for or against a pro	oposal on the agenda? (X) For proposal
Name: Paisy Migue		() Against proposal () General comment
Business or Organization Affilia 3701 W. Shire Address: SSS4LD 2	ation: A Community of Friend Blyd, Suite 700 LOS Angeles	ds EU CA 90010
Street	City	State Zip
Business phone: 213-480.	CSC Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT I	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 13/2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, Case No.
I wish to speak before the	Name of City Agency, Department, Committee o	r Council
Do you wish to provide general pub	olic comment, or to speak for or against a propos	sal on the agenda? () For proposal
Name: Marci Niva		() Against proposal () General comments
Business or Organization Affiliation:	: Westside Coalition	
Address: Street	Age, Venice	State, 9034
Business phone: 310-314-0	071 Representing: 4250 SCRUICE OF	gencier, faith oras & gov ager
		DRMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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April 13 2016		Agenda Item #2	P.
I wish to speak before the	BOARD OF PUBLIC WORKS		
Na	me of City Agency, Department, Committe	ee or Council	
	comment, or to speak for or against a pro-		or proposal Against proposal
Name: Eva William	S	() 0	General comments
Business or Organization Affiliation: _	Corponation for Suppo	rtive Housing	(CSH)
Address: 800 S. Figuer	on St. Suite 810, L	A. CA	92264
Business phone:	J,	State Z	
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:	
Client Name:		Phone #	:
Client Address:			
Street	City	State Zi	ip

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Date			Agenda Item		
I wish to speak before the			Homelers & Aver	ty Com.	
Do you wish to provide general p	oublic comment, or t	ncy, Department, Com		a? (>) For proposal () Against proposa () General comme	
Business or Organization Affiliati	on: Shelter		p, Inc.	_ () donoral donum	
Address: 520 5 Gr			State	9007/ Zip	
Business phone: 2/3 94345					
CHECK HERE IF YOU ARE	PAID SPEAKER	AND PROVIDE CLIEN		01	
Client Name:				Phone #:	
Street		City	State	Zip	

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2

Date 4-13-16	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR			Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, C			
Do you wish to provide general p	public comment, or to speak for or again			For proposal () Against proposal () General comments
Business or Organization Affiliation	on: SRO WOUSING CO	PPOPATIO,	N	
Address: 1055 W 7	The ST. Los ANGEZES -940 Representing: Non	1 CA 9	0017 State	Zip
Business phone: 213) 229-	-9440 Representing: Now	PROFIT,	AFFORDAB	res Llousing
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE C	LIENT INFORM	ATION BELOV	w:
Client Name:			Ph	one #:
Client Address:Street	City		State	Zip

CITY OF LOS ANGELES SPEAKER CARD DECLAR ATTOM

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EXOLITIO	THE EXTENT REGEOGRAPH FOR THE THEODING OF	TIOLIT TO CALL OF ON TOO
Date 7016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agencia Item, or Case No.
I wish to speak before the		
	Name of City Agency, Department, Committee	No.
Do you wish to provide general Name:	public comment of to speak for or against a prop	oosal on the agenda? For proposal Against proposal () General comments
Business or Organization Affiliat	ion: Home lessness	POVENTY ADVOCAT
Address:		
Business phone:	Representing: City Howel	ess State NAZio
	A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELOW:
Client Name:	L Zuma Doss Aka S	aHourg Phone #:
Client Address:	V. Los Angeles	9th circuit State Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	enda Item, or Case No.
wish to speak before the _		OF A STATE OF STATE O	
	Name of City Agency, Department, Commi	ttee or Council	
Do you wish to provide gene	eral public comment, or to speak for or against a	proposal on the agenda? () Against proposal
Name:		() General comments
	filiation:		
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:	
Client Name:		Phor	ne #:
Client Address:			
Street	City	State	Zip