YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING OT REQUIRED TO PROVIDE PERSONAL INFORMA THE EXTENT NECESSARY FOR THE PRESIDING O	TION IN ORDER TO SP	PEAK,
Date 10/14/14	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		14-0746
Do you wish to provide general p	public comment, or to speak for or against a pro	posal on the agenda?	For proposal
Name: Mike de lo	Pocha		Against proposalGeneral comments
Business or Organization Affiliati	ion: CA's for safety ?.	Justice	
Address:	e		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:		Pł	none #:
Client Address:Street			
Street	City	State	Zip
Please see reverse of card f	for important information and submit this entire c	ard to the presiding o	fficer or chairperson.

YOU ARE N	S IS A PUBLIC DOCUMENT SUBJECT TO POS OT REQUIRED TO PROVIDE PERSONAL INFO THE EXTENT NECESSARY FOR THE PRESIDI	RMATION IN ORDER TO	SPEAK
Date	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCED	4	lo., Agenda Item, or Case No.
I wish to speak before the	ECONOMIC DEVER Name of City Agency, Department, Com		CANTRE
Name: JOHN			Against proposal
	ion: CENTRAL (ITY &	IssociAtion	
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIER	NT INFORMATION BEL	-OW:
Client Name:			Phone #:
Client Address:	City	State	Zip
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Date (0/14/14	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	Fronomic Committee Name of City Agency, Department, Committee		CF 14-0746
Do you wish to provide general	public comment, or to speak for or against a propo	osal on the agenc	a?()For proposal ()Against proposal
Name: Susan 1	Burtm		() General comments
Business or Organization Affiliat	ion: A New Way of Leher	Allo Uso	- None
Address 9512	C Canton LA/	CA	90002
Street Business phone: 323 563	3575 Representing:	NINH	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEI	LOW:
Client Name:			Phone #:
Client Address:	City	State	Zip
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NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTI YOU ARE NOT REQUIRED TO PROVIDE PERSONAL INFORM EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING	MATION IN ORDER TO SPEAK,
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 Got Dev + Per Name of City Agency, Department, Commit	A CT- 14-0746 tee or Council
Do you wish to provide general public comment, or to speak for or against a p	roposal on the agenda?
Name: Magulaur	 Against proposal General comments
Business or Organization Affiliation: Friends Outside	in Ul Court
Address: 2415 Goloralo Stud #21	7 Pasadera 9/10/
Business phone: (620) 745-760 Representing: Seme)	State Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:	Phone #:
Client Address:City	State Zip
Please see reverse of card for important information and submit this entire	

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING C DT REQUIRED TO PROVIDE PERSONAL INFORMATI THE EXTENT NECESSARY FOR THE PRESIDING OFF	ON IN ORDER TO SP	EAK,
Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Économic Dev Name of City Agency, Department, Committee of	CF	Agenda litem, or Case No. 14-0746
Do you wish to provide general point of the second	public comment, or to speak for or against a propo <u>DSMA</u> ion: <u>Home Doy</u> Indu		 () For proposal () Against proposal () General comments
Address:Street	City	State	90017 Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INF		v:
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip
	for important information and submit this entire car		

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Date 10/14/14	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORC	OI	lo., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Co		CF 14-0746
Do you wish to provide general	public comment, or to speak for or again	st a proposal on the agend	a? (>>> For proposal
Name: VIVIENNE	LEE		() Against proposal() General comments
Business or Organization Affiliat	ion: <u>FEDF</u>		
Address: 1050 W. 7	M Street, SLite 1920 L	A CA	90017 Zip
Business phone: 213-623	2202 Representing:		
	A PAID SPEAKER AND PROVIDE CL	IENT INFORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	21		
Street	City	State	Zip
Please see reverse of card	or important information and submit this	entire card to the presiding	officer or chairperson.

NOTE: THIS IS A PUBLIC DOCUMENT SUB YOU ARE NOT REQUIRED TO PROVIDE PER EXCEPT TO THE EXTENT NECESSARY FOR	RSONAL INFORMATION IN (ORDER TO SPEAK	,
Date ID/14/14 THE CITY COUNCIL' DECORUM WILL BE		Council File No., Agend	da Item, or Case No.
I wish to speak before the			14-0746
Do you wish to provide general public comment, or to speak for Name: <u>Kabira</u> Stokes	or or against a proposal on	()	For proposal Against proposal General comments
Business or Organization Affiliation: 1 Sidore 1		、、、	
Address: <u>411</u> S. Hewitt St. Street Ci	LA J	CA State	00013 Zip
Business phone: <u>323 - 222 - 3322</u> Representing:	myself		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PRO	VIDE CLIENT INFORMA	TION BELOW:	
Client Name:		Phone	#:
Client Address: Street Ci	ty	State	Zip
Please see reverse of card for important information and s	ubmit this entire card to the	e presiding officer	or chairperson.

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Date 0/14/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the	Economic Development Name of City Agency, Department, Committee or	Council	E 14-0746
Do you wish to provide genera	al public comment, or to speak for or against a proposa	al on the agenda'	?()For proposal
Name: TANISHA	Denava		() Against proposal() General comments
Business or Organization Affili	ation: Youth Justice coalitic	M	
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELC	w:
Client Name:		P	hone #:
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Street	City	State	Zip
Please see reverse of care	d for important information and submit this entire card	to the presiding of	officer or chairperson.

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 (F 14-	174
Date 10/14/2014 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Council File No., Agenda Item, or Case N 3	Jo.
I wish to speak before the <u>5000000000000000000000000000000000000</u>	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? (<i>V</i> For proposal () Against proposal () Against proposal () Against proposal () General comment	
Business or Organization Affiliation: The Virtuous Woman, Due / L. A. VOICC	
Address: <u>P.O. Box 453062 Los Augels Ca 7045</u> Business phone: <u>3103707520</u> Representing: <u>Fair Hiving Ordinace</u> ^{Zip} Diem ²	3
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	
Client Name: Phone #:	
Client Address: City State Zip	

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

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON OT REQUIRED TO PROVIDE PERSONAL INFORMATION THE EXTENT NECESSARY FOR THE PRESIDING OFFIC	N IN ORDER TO S	SPEAK,
Date 10/14/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the	Economic purelog ment Name of City Agency, Department, Committee or	Council	4-0746
Do you wish to provide general Name: <u>Pabhi</u>	public comment, or to speak for or against a propose Ravan Alexandue	al on the agenda	 A? () For proposal () Against proposal () General comments
Business or Organization Affiliat	ion: JEAR, LA VOICE	ex	
	former st LA	CA State	90035 Zip
Business phone: 310 405	72-72 Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip
	for important information and submit this entire card		

YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJECT TO POSTING OT REQUIRED TO PROVIDE PERSONAL INFORMAT THE EXTENT NECESSARY FOR THE PRESIDING OF	ION IN ORDER TO SPEAK,
Date 10 /14 /2014 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 44-0746
Do you wish to provide general Name: <u>Accessed</u> Business or Organization <u>Affiliat</u> Address: <u>853</u> Business phone: <u>Street</u>	public comment, or to speak for or against a prop	
Business phone: 510-35	U - 73/2 Representing: $D New$	Way of Life
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
Please see reverse of card	for important information and submit this entire ca	rd to the presiding officer or chairperson.

YOU ARE NOT REC	UBLIC DOCUMENT SUBJECT TO POSTING VIRED TO PROVIDE PERSONAL INFORMA ENT NECESSARY FOR THE PRESIDING C	TION IN ORDER TO SE	PEAK,
Date 14/4	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Economic Orvelo ne of City Agency, Department, Committe	1	E 14-0746
INdif	le of City Agency, Department, Committe		
Do you wish to provide general public	comment, or to speak for or against a pro	posal on the agenda?	() For proposal Against proposal
Name:		h.	() General comments
Business or Organization Affiliation:	TO E		/
Address:Street			
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CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT II	VFORMATION BELO	W:
		D	"
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YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING OT REQUIRED TO PROVIDE PERSONAL INFORMAT HE EXTENT NECESSARY FOR THE PRESIDING OF	TION IN ORDER TO SPEAK,		
Date 10/14/14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $14 - 0740$		
I wish to speak before the Economic Development Committee or Council				
Do you wish to provide general p Name: <u>JAIMG</u>	public comment, or to speak for or against a prop	posal on the agenda? () For proposal () Against proposal () Gen eral comments		
	ion: Hapital Association of	5 Southern A		
	City	State Zip		
Business phone: $2\underline{3}/5\underline{38}$ -	CTOZ Representing:			
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:		
Client Name:		Phone #:		
Client Address:Street	City	State Zip		
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YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING O T REQUIRED TO PROVIDE PERSONAL INFORMATI HE EXTENT NECESSARY FOR THE PRESIDING OF	ION IN ORDER TO SPEAK,	
Date 16-14-14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case I	No.
I wish to speak before the	Economic Dovelopmont Name of City Agency, Department, Committee	CF 14-074 or Council	6
Do you wish to provide general	public comment, or to speak for or against a propo		
Name: FILARDO RE	YES	() Against propos() General comm	
Business or Organization Affiliati	on: Los ANGE LES COUNTY FORERATIO	on of LABOR	
Address: 892/ Vossle	TR AVE SOUTH GATE G	4 90280	
Business phone:	City City Representing:	State Zip	
	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:			
Street	City	State Zip	
Please see reverse of card f	or important information and submit this entire car	rd to the presiding officer or chairperson	n.

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING TREQUIRED TO PROVIDE PERSONAL INFORM HE EXTENT NECESSARY FOR THE PRESIDING (ATION IN ORDER TO SPEAK,
Date 10 14 2014	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No. Agenda Item, or Case No
I wish to speak before the2	ECOMOMIC Development Committee Name of City Agency, Department, Committee	ee or Council
Do you wish to provide general p Name: FRANK Alvarez	public comment, or to speak for or against a pro	oposal on the agenda? () For proposal () Against proposal () General commen
Business or Organization Affiliati		RePower LA
Address: 464 Locus At Street 7 iz - 911-	Ne, Site 202; LA 90017 -9400 X124 Representing:	State Zip
	A PAID SPEAKER AND PROVIDE CLIENT I	
Client Name:		Phone #:
Client Address:Street	City	State Zip
Please see reverse of card t	or important information and submit this entire	card to the presiding officer or chairperson.