14-1037

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Date 11/5/14	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 of	or Council
Do you wish to provide general	public comment, or to speak for or against a propo	
Name: LDV · E	PAGLIETTO	() Against proposal () General comments
Business or Organization Affilia	ion: Bufferdield Communi	lations Inc
Address: 31234	Palos Verdes Dr W F	Palos Verdes CA 90275
	9023 Representing: THE TEL	· · · · · · · · · · · · · · · · · · ·
	A PAID SPEAKER AND PROVIDE CLIENT INF	1
Client Name: 146	TERMO COMPANY	Phone #: 312:485-864
Client Address: 3215 Street	Cherry Ave Long Bea	
	V	•

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Date	THE CITY COUNCIL'S RULES (Council File	No., Agenda Item, or Case No.
Nov 5, 14	DECORUM WILL BE ENFORCE	T:	75
I wish to speak before the	Argelaz City Council Name of City Agency, Department, Cor	nmittee or Council	
Do you wish to provide general pu	blic comment, or to speak for or agains	t a proposal on the ager	nda? () For proposal
Name: P. Anthony 1140	WAS		Against proposal General comments
Business or Organization Affiliation	: CALIFORNIA Independent Petr		
Address: 1001 K. Strut	Sustin FL Sacramole	a	95814
Business phone: Street	Such FL Sacrambe City Representing: CALF Ind	Petroleum Asso	Zip
	PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BE	ELOW:
Client Name:			Phone #:
Chefft Name.			_ I Hone #.
Client Address:			
Street	City	State	Zip

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Date // -5 -/ 4 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee of	14-1 ITEM	genda Item, or Case No.	
Do you wish to provide general p	oublic comment, or to speak for or against a propo	(For proposal Against proposal General comments	
Business or Organization Affiliation	on:			
Address:			90013	
Street Business phone 213858	City 3/25 Representing:	State	Zip	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Pho	one #:	
Client Address:Street	City	State	Zip	

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Date		THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE me of City Agency, Department, C	CED. # 25	ile No., Agenda Item, or Case No.
Do you wish to pro		comment, or to speak for or again		enda? () For proposal () Against proposal
Name:	John	WALSH		() General comments
Business or Organ	nization Affiliation: _			
Address:	6	·A		
	Street	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF	YOU ARE A PA	ID SPEAKER AND PROVIDE CL	LIENT INFORMATION E	BELOW:
Client Name:				Phone #:
Client Address:	04	Cit.	04-4-	7:0
	Street	City	State	Zip

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Date J J J J J J J J J J J J J J J J J J J	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File-No.	Agenda Item, or Case No.
	Name of City Agency, Department, Committee of	or Council	
Name:	public comment, or to speak for or against a propo fion:	2	/ \ Against proposal
Addross:			
Address:Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INF		hone #:
Client Address:Street	City	State	Zip

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Date 11.5 - 14		ICIL'S RULES OF BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, D	epartment, Committee	or Council	
Do you wish to provide general pu	ublic comment, or to spea くりといり	ak for or against a prop	oosal on the agend	a? () For proposal () Against proposal () General comments
Business or Organization Affiliatio Address: Street Business phone: £18.796		POTETZ	- RAUCH State	CA 91326 Zip (WS ANDERI
CHECK HERE IF YOU ARE A			FORMATION BEL	ow:
Client Name: Client Address: Street		City	State	Phone #:

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Date 11-5-14	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	City Council Name of City Agency, Department, Committee	ee or Council
Do you wish to provide general	public comment, or to speak for or against a pr	oposal on the agenda? () For proposal
Name: Lori Kal		() Against proposal
Business or Organization Affiliati	ion:	
Address:		
Address:Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date	THE CITY COUNCIL'S RULI DECORUM WILL BE ENFOR	20 01	No., Agenda Item, or Case No.
I wish to speak before theN	Lame of City Agency, Department,		
Do you wish to provide general publ	lic comment, or to speak for or aga	inst a proposal on the ager	nda? (X For proposal
Name:	Poton	Williams aclub a	() Against proposal () General comments
Address:Street	City	State	90037-171
Business phone:		Water Com	te
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE (CLIENT INFORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip