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EXCEPT TO	THE EXTENT NECESSART FOR THE PRESIDING OF	ICEN TO CALL OF ON TO	0
Date 6/10/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agend	da Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	CF 14	150
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda?	or proposal
Name: JOSEPU	DXZCO6UIN		Against proposal General comments
Business or Organization Affiliat	ion: DUN AND DERMIT	1200	
Address: 82)2	HECROSE AVE, SUIT	E 40 , C	A 90046
Business phone: 424-2	54-99 Representing: CONCULT	wr-	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone	#:
Client Address:			
Street	City	State	Zip

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10 V U N 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
	Name of City Agency, Department, Committee		
Do you wish to provide general pu	blic comment, or to speak for or against a pro	posal on the agend	da? (For proposal
Name: HAROLD GR			() Against proposal () General comments
Business or Organization Affiliation	n: AAGCX		
Address: 7743 5,	HARLARD BLVD CA City 536 Representing: AAC-CA	State	90018
Business phone: 323 732 9	536 Representing: AAC-CA		
	PAID SPEAKER AND PROVIDE CLIENT I		
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date & 10 15 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee or	too	Agenda Item, or Case No.
Do you wish to provide general p Name: Business or Organization Affiliation Address: Street Street Street	aughan A D + A CCOR Paragraphy		For proposal Against proposal General comments Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:			
Client Address:Street	City	State	Zip

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EXCEPT TO THE EXTENT NECESSART FOR THE PRESIDING OFFICER TO CALL OF ON TOO			
THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. I wish to speak before the Housing Counciles	Council File No., Agenda Item, or Case No.		
Name of City Agency, Department, Committee	or Council		
Do you wish to provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment, or to speak for or against a proportion of the provide general public comment.	psal on the agenda? For proposal () General comments		
Address: 2100 Sawtslle # WAA Street City	CAL 90x25		
Address: Street City	State Zip		
Business phone 477 17-0/ Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:		
Client Name:	Phone #:		
Client Address: Street City	State Zip		

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EXCELLIO		
Date 6/10/15	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 14-1150
Do you wish to provide general	public comment, or to speak for or against a propo	osal on the agenda? () For proposal
Name: Alex Comisc		() Against proposal () General comments
Business or Organization Affiliat	ion: California Apart ment As	soc LA
Address: 370 N. I	Larchmont LA	CA 90004 State Zip
Business phone: (323) 466	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name: California	Apothet ASSOC LA	Phone #: (323)466-349
Client Address: 320 No. Street	Lovehmort LA city	CA 90004 State Zip

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G/16/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the	Housing Committee	CF 14-1150	
1	Name of City Agency, Department, Committee		
Name: Ezra Gale	lic comment, or to speak for or against a prop	() Conoral comments	
Business or Organization Affiliation:		0.0	
Address: 350 5 B	Sixel LA	900 17	
Street	City	State Zip	
Business phone:	Representing:		
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:			
Street	City	State Zip	

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Date 2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the		CF 14-1150	
	Name of City Agency, Department, Commit		
Name:	undic comment, or to speak for or against a p	Against proposal (Against proposal (General comments	
Business or Organization Affiliation:			
Address:			
Street Business phone:	Representing: City	e for nomeless	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name: C1 17 201	ns of LA sustai	hable Phone #:	
Client Address:	ffordable city	State Zip	

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Date G G G G G G G G G G G G G G G G G G G	Name of City Agency Department, Committee		Agenda Item, or Case No.
Do you wish to provide gene	ral public comment, or to speak for or against a prop	osal on the agenda?	() For proposal
Name:	Degne from Garage	Conversion	Against proposal
Address:			
Street	City	State	Zip
Business phone:	Representing:		
	E A PAID SPEAKER AND PROVIDE CLIENT INI		w:
Street	City	State	Zip