WEBSITE.
TO SPEAK, 09-2642

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Jo.13.15	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		-
	public comment, or to speak for or against a propo	osal on the agenda?	() For proposal () Against proposal () General comments
Business or Organization Affiliati	ion: CONTRAL CITY ASSOC.		
Address: 626 W	City City	90017 State	Zip
Business phone: 21362Y17	213 Representing:		
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Client Name:		Ph	one #:
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Date 10 - 13 - 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee of	r Council	
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Street	City	State	Zip

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Date	THE	CITY COUNCIL'S RULES	OF Coun	cil File No., Agenda Item, or Case N	10.
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Date /0/13//5 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee	celeties	Agenda Item, or Case No.
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Date 6/13/15	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	or Council	
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Date /8/3/18	5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
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Client Address:		Citv	State	Zip

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Date W/13//5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before thet	Name of City Agency, Department, Commit	s Committee or Council	ع
Name: Tim N	ral public comment, or to speak for or against a plade ox liation: _SELU -USUU		a? (≺) For proposal () Against proposal () General comments
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Client Address:	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
10/13/15	DECORUM WILL BE ENFORCED.	45
I wish to speak before the	Name of City Agency, Department, Committee	or Council
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Name: Veroni	ca Federofsky	() Congral comments
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		CORMATION RELOW.
CHECK HERE IF YOU	ARE A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
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Date 10/13/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item	n, or Case No.
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Name: TONA	Traylor		nst proposal eral comments
Business or Organization Affiliati	ion: Los Angeles Black (Noiker Center	2
Address:Street	Crershan Bl. (A)	A 40043 State Zip	
Business phone: (32) 752		State Zip	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phone #:	
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Street	City	State Zip	

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Date 10/3/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
wish to speak before the _	Name of City Agency, Department, Committee	ee or Council	
Do you wish to provide gene Name: Business or Organization Af	eral public comment, or to speak for or against a professional filiation:	oposal on the agenda	? () For proposal () Against proposal () General comments
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Street	City	State	Zip

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