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

Date MA- 29,2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	ECONOMIL DEVELOPME Name of City Agency, Department, Committee		. 14-1374
1	public comment, or to speak for or against a property \mathcal{LS}	- (Against proposal
Business or Organization Affiliati	ion: Los ANGELES (DUNTY	FENERATI	ON GE LABOR
Address: 2230	AMES WOGDS, I	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW	:
Client Name:		Pho	ne #:
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Name: <u>EDGAR GO</u> Business or Organization Affiliation Address: <u>IS45 Wils</u>	public comment, or to speak for or against a prop		da? () For proposal () Against proposal () General comments
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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
MAJ 2012015	DECORUM WILL BE ENFORCED.	ITEM ONE
I wish to speak before the5	CON DEU COMMIS	TE CF 14-1371
	Name of City Agency, Department, Committee	e or Council
	blic comment, or to speak for or against a pro	() Against proposal
Name: JONATHAN K	LEIN	() General comments
Business or Organization Affiliation	CLUE	
Address: 969	Lucas Ave LA CA	State Zip
Business phone:	Representing:	
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Client Name:		Phone #:
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Do you wish to provide general public comment, or t	o speak for or against a proposa	l on the agenda	? (>) For proposal
Name: SOPHIA CHENG			 Against proposal General comments
Business or Organization Affiliation:COC	- LA		
Address: 1730 W. Olympi Street	c LA	C A State	90015 Zip
Business phone: <u>1(3,380 (020</u> Represe		State	Σiþ
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I wish to speak before the	Economic Ocvelopment Name of City Agency, Department, Comm	<u>t</u> <u>Committee</u> nittee or Council	CF-14-137
Name: IMELDA		() Against proposal) General comments
Business or Organization Affiliat	ion: Los ANGELES AllIANC	E FORA NEW 15	COM OMY
Address: 464 S.	LU CAS City	State	1
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Name: BRENDA S	mith			() General c	
Business or Organization Affiliati	on: IHE IMF	GATANCE ULT	CW		
Address: 439, W,				90000	2
Business phone: 213-8		City	State	Zip	
CHECK HERE IF YOU ARE A	I		MATION BE	LOW:	
Client Name:				Phone #:	
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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 Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF **DECORUM WILL BE ENFORCED.** TIME CF14-1371 ECONOMIC. DEV. OMUN I wish to speak before the Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? (V) For proposal) Against proposal) General comments Business or Organization Affiliation: Address: Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address: Street Citv State Zip

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Name: MARTHA JONE	9		Against proposal General comments
Business or Organization Affiliation:	VITE HERE		
Address: 2034 S. Corning	0	State Z	20034
Business phone:		State 2	
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	CONOMIC DEVELOP MENT Name of City Agency, Department, Committee or (M CF14-137
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Name: POSEMARY	MARTINEZ		 Against proposal General comments
/ Business or Organization Affiliation:	ULTCW		
Address: 17510 Sherma	w Way #112 Lake Balkoa	C4 State	91406 Zip
Business phone:	Representing:		
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CITY OF LOS ANGELES SPEAKER CARD 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 Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF **DECORUM WILL BE ENFORCED.** 200 GF 14-1371 I wish to speak before the _____ Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal) Against proposal Name: Marlana Ruy General comments Address: Street City State Business phone: _____ Representing: _____ CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: _____ Phone #: Client Address: _______Street City State Zip

CITY OF LOS ANGELES SPEAKER CARD 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 Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF **DECORUM WILL BE ENFORCED.** CF 14-1371 I wish to speak before the Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal Against proposal USSEN Monet SR ____ General comments Business or Organization Affiliation: ______ HOMERSY'S MOUST Address: Business phone: _____ Representing: _____ Home Bou Zip State CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Phone #: Client Name: Client Address: ________Street City State Zip

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Date S-29	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
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Do you wish to provide general	public comment, or to speak for or against a propos	sal on the agenda?	() For proposal
Name: JOHN	HOWLAND		(·) Against proposal
Business or Organization Affiliati	ion: CENTRAL CITY		(a)
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Name: Adena R	Tesslee		 Against proposal General comments
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Do you wish to provide general p Name: Dustan B Business or Organization Affiliation	oublic comment, or to speak for or against a pro Datton on: <u>Biz Fed</u>	posal on the agenda?	 For proposal Against proposal General comments
Address: 1000 N. Alo	Meda H. LA City Biz Fed	CA State	900/2 Zip
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Name: Transitional	c comment, or to speak for or against a propos JUB Program Exemption Los Angeles Conservatio	Provision	 For proposal Against proposal General comments
Address: 1020 S. FIC	ett st. 9002B	State	Zip
	160 Representing: EStefany N	<u>NENCLEE</u>	v:
Client Name:		Pho	one #:
Client Address:Street	City	State	Zip

YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJECT TO POSTIN OT REQUIRED TO PROVIDE PERSONAL INFORM THE EXTENT NECESSARY FOR THE PRESIDING	ATION IN ORDER TO	SPEAK,
Date 5/29/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the $\underline{\mathcal{C}_{CO}}$	Name of City Agency, Department, Committee	pittee ee or Council	CF (4-137/
Name: Iransitional	public comment, or to speak for or against a program Exemption	Provision	la? () For proposal () Against proposal () General comments
Business or Organization Affiliation Affiliation Affiliation Address: 1620 S	ion: <u>LA</u> Conservation (cleattest, LA	CA State	90023
Business phone $(323)526$	5-1460 Representing: <u>La</u>	Morals	
	A PAID SPEAKER AND PROVIDE CLIENT		_ OW:
Client Address:	City		
	for important information and submit this entire	State	Zip officer or chairperson.

YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJ OT REQUIRED TO PROVIDE PER THE EXTENT NECESSARY FOR T	SONAL INFORMATION	IN ORDER TO SP	PEAK,
Date 5/29/15	THE CITY COUNCIL'S DECORUM WILL BE		Council File No.,	Agenda Hem, or Case No.
I wish to speak before the	Name of City Agency, Depar			GF14-1371
Do you wish to provide general p CRISTAL MAROUR Name: Transitional Business or Organization Affiliati				() Eor proposal () Against proposal () General comments
Address: 1020 3. Street	FICKett St	90023	State	Zip
Business phone 32.3)52,	$6 - 146^{\circ}$ Representing: C	rystal Marcog	State	Zip
CHECK HERE IF YOU ARE A		t ,		w:
Client Name:			Ph	none #:
Client Address:Street	City		State	Zip

CITY OF LOS ANGELES SPEAKER CARD NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE. ARE NOT REQUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK. EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU Council File No. Agenda Item, or Case No. Date THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. I wish to speak before the ECONOMIC Development Committee CF14-1371 Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? K For proposal Against proposal DIILE RUIZ o program Exemption General comments Business or Organization Affiliation: 14 Conservation DVPS Address: 1020 5= FICKET+ St, State Zip Business phone: (323)526-1460 Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Phone #: Client Name: Client Address: Street City State Zip

YOU ARE NO	S 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 5/29/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	x, Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or	onnitte Council	e CF (4-137)
JASMIN ANGELES Name: Transitional	public comment, or to speak for or against a propose Sob program examption f ion: LA Conservation Corr	Provenor	(`) Against proposal
Address: <u>620 S. F.c</u> Street	Lett Sl., 90023 City	State	Zip
Business phone: 323 803	5538 Representing: Jammen Ang	ieles_	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

YOU ARE NOT R	A PUBLIC DOCUMENT SUBJECT TO POSTING EQUIRED TO PROVIDE PERSONAL INFORMAT EXTENT NECESSARY FOR THE PRESIDING OF	ION IN ORDER TO SP	EAK,
	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before theN	Ty Council Dr ame of City Agency, Department, Committee	or Counci Om	mille
Do you wish to provide general publ	ic comment, or to speak for or against a prop	osal on the agenda?	() For proposal
Name: Ruth Sa	rnoff		 Against proposal General comments
Business or Organization Affiliation:			
Address			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW	v:
Client Name:		Ph	one #:
Client Address:	01	0111	7
	City nportant information and submit this entire ca	State	Zip
riease see reverse of cald for it	inportant information and submit this entire co	ind to the presiding on	icer or charperson.