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Date 2/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No. 4 14-1656
I wish to speak before the	PW Committee	0	
Do you wish to provide general p	Name of City Agency, Department, Committee of public comment, or to speak for or against a proportion		? () For proposal () Against proposal General comments
Business or Organization Affiliati	ion: CCA	CA	90017
Address: 626 Wish	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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Date 2 - 18-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No. 44 4 656
I wish to speak before the	Name of City Agency, Department, Committee or C		Con Committee
	public comment, or to speak for or against a proposa	on the agenda	? () For proposal
Name: Ruth S	arnott		() Against proposal () General comments
Business or Organization Affiliati	on:		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zin
Street	City	State	Zip

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Date 2/18	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	•
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agenda?	() For proposal
411	we den		Against proposal General comments
Business or Organization Affiliation	on: Venice Community	Hsng.	
Address:	,	•	
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	w:
Client Name:		PI	hone #:
Client Address:			
Street	City	State	Zip

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Date 2 18 15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	6
I wish to speak before the	PUBLIC WORKS Name of City Agency, Department, Committee or	r Council	
Do you wish to provide general	public comment, or to speak for or against a propos	sal on the agenda? TOFor proposal	
Name: STEVEA	S VAN ZUE	() Against proposal () General comment	ts
Business or Organization Affiliat	tion: SPO HOUSING		
Address: (055 11)) THE #3250 [A	4.98817	
Business phone: 2/3.28	City	State Zip	
	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:	
Client Name:		Phone #:	_
Client Address:Street	City	State Zip	

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Date > \ 7 \ 5	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
Do you wish to provide general p	public comment, or to speak for or against a prop	posal on the agenda? () For proposal
Name: Mark SI		() Against proposal
Business or Organization Affiliation	on: Ore-Cal	
Address:Street	City	State Zip
Business phone: 23 680	9540 Representing: property (DWNEY
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 2/18/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the			14-1676
	Name of City Agency, Department, Committee of	r Council	
Do you wish to provide general pu	blic comment, or to speak for or against a propo		For proposal () Against proposal () General comments
	1: The Midwight Mission	^	
	Pedro LA CA GODIA		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELC	ow:
Client Name:		P	hone #:
Client Address:			
Street	City	State	Zip

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Date 2.18.15	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		
Do you wish to provide general p	ublic comment, or to speak for or against a proposi-	al on the agen	da? () For proposal
Name: Bedry	Dennison		Against proposal General comments
Business or Organization Affiliation	on: LA CAN		
Address:			
Street	City	State	Zip
Business phone:	Representing:	*****	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BE	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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2/18/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	Agenda Item, or Case No. 14 1656
I wish to speak before the	Holici Horks Name of City Agency, Department, Committee	or Council	
Do you wish to provide general p	ublic comment, or to speak for or against a propo	osal on the agenda?	() For proposal () Against proposal
Name: Assemb Mon	nas		() General comments
Business or Organization Affiliation	on LA. CAN		
Address: 13/5 S. 44	ower La.	State	90015 Zip
Business phone: 213-43	4-2/3/ Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW	V:
Client Name:		Ph	one #:
Client Address:		0	
Street	City	State	Zip

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Date 2-18-15	THE CITY COUNCIL'S RULI DECORUM WILL BE ENFOI	-3 OI	o,, Agenda Item, or Case No.
I wish to speak before the	Pasic Work Name of City Agency, Department,	Committee or Council	
Do you wish to provide general	public comment, or to speak for or aga	ainst a proposal on the agenda	? () For proposal
Name: 10 50	Smith	*	(X) Against proposal() General comments
Business or Organization Affiliati	ion: LACAN		
Address: 838 E	5 60 St CA	CA	2002
Business phone: 213 26	City Representing:	State	Zip
	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 2-18-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	71	, Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	nittee or Council	14-6656
Do you wish to provide general p	public comment, or to speak for or against a	proposal on the agenda?	? () For proposal Against proposal
Name: Span	Granny		() General comments
Business or Organization Affiliation Address:	on: Los Angeles	Community	Acton Nethon
Business phone: 213-228	City	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date /- 18-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	14.1656
	ublic comment, or to speak for or against a propo		? () For proposal (Against proposal () General comments
Name: Wesley Wi	ther vr		- () General comments
Business or Organization Affiliation			
Address: 383 E	6th St LA, CA. 9001	14	7:-
Business phone: 323-424		State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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Date 2-18-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theI	Name of City Agency, Department, Committee	
Do you wish to provide general pub	olic comment, or to speak for or against a pro	posal on the agenda? () For proposal
Name: SRUEB	SELAWARTZ	() Against proposal (General comments
Business or Organization Affiliation	: Citizen of PACIFIC	Palisanes
Address: 1926 PA	16 mes M. City	$\frac{\sqrt{4}}{2}$ State $\frac{\sqrt{2}}{2}$
Oliect	173 Representing: Concerne	Citizens
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT IN	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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#4

Date 2/18/15		OUNCIL'S RULES OF WILL BE ENFORCED.	Council F	ile No., Agenda Item, or Case No.
I wish to speak before the		Cy, Department, Comm		on 14-1656
Do you wish to provide general			proposal on the age	enda? () For proposal () Against proposal
Name: Tim	McDani	el		(General comments
Business or Organization Affiliat	ion: Watts	Neighborhor	e Council	/ACCE
Address: /oS21	Weigand	L. A.	CA	90002 Zip
Business phone:	Represer	nting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER A	AND PROVIDE CLIEN	T INFORMATION I	BELOW:
Client Name:				Phone #:
Client Address:			<u> </u>	
Street		City	State	Zip