15-0002-593

CITY OF LOS ANGELES SPEAKER CARD

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 4-2-/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	LA City (cand) Name of City Agency, Department, Committee of	ar Councit	
Do you wish to provide general portion of the Name: Adam Lage	ublic comment, or to speak for or against a propo		? (V) For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Los Angeles Busineu Counc	5.)	
Address: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	THE CITY COUNCIL'S RULES (Opp Council File	No., Agenda Item, or Case No.
19/2/16	DECORUM WILL BE ENFORCE	D.	4/
I wish to speak before the	City Council		
•	Name of City/Agency, Department, Con	nmittee or Council	
Da vas wish to provide apparel as		o proposal on the occur	do 2 () For proposal
-	ublic comment, or to speak for or against	a proposal on the agen	() Against proposal
Name: KN 47	NERUMAH		() General comments
Business or Organization Affiliatio	n: MARTIN Cuthe	1 KINGE C	8461760Z
Address: 1701	MORTON Ave-	, 1.A., Ca	90026
Business phone: $203-40$	MORTON AVE- 0-9155 Representing: MUK	Coalition	4 50 Cal 350
	,		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIE	NT INFORMATION BE	LOW:
O" . N			mt (I
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 9-2-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	nda Item, or Case No.
I wish to speak before the	Name of City Agendy, Department, Committee	e or Council	
	Name of City Agency, Department, Committee	e or council	
Do you wish to provide general p	oublic comment, or to speak for or against a pro	posal on the agenda? 🖄) For proposal
Name: Took F		() Against proposal) General comments
Business or Organization Affiliation	on: & So Cal 350 / Tar S	and Actie	n Soll
Address: 66 N. C	Daidontal BI LA	CA 900	26
Business phone: 323 562		State	Zip
·	A PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:	
Client Name:		Phone	e #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
9-2-15	DECORUM WILL BE ENFORCED.	#	41
I wish to speak before the	L.A. City Council 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		a? () For proposal () Against proposal () General comments
	on: 50 Cal 350 Climate AZZ	6 m	
Address: 3400 S. Bar	rington Ave. Los Angeles	CA	90066-2018
Business phone: 310 570	6509 Representing:	Otale	Σ:μ
	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date	THE CITY COU	NCIL'S RULES OF	Council File	No., Agenda Item, or Case No.
9/1/15	DECORUM WIL	L BE ENFORCED.	41	
I wish to speak before the	Pounal		<u> </u>	
	Name of City Agency,	Department, Committee o	or Council	
Do you wish to provide general p		eak for or against a propo	sal on the ager	() Against proposal
Name: MANISM VA	te			() General comments
Business or Organization Affiliati	ion: SCOPE -	South LA		
Address: 1715 W.	Florence Ave	A	<u>CA</u> State	9000s
Business phone: 323-75		•	Otale	2.1 p
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND	PROVIDE CLIENT INF	ORMATION BE	ELOW:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip

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Date 9/2/15		UNCIL'S RULES OF ILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency	, Department, Committee		
Do you wish to provide general	public comment, or to s	peak for or against a prop	osal on the agenda	a? (X) For proposal
Name: LAUIR MUI	rnida			() Against proposal () General comments -
Business or Organization Affiliati	ion: SCOPE		tribate and the same	
Address: 115 W. Fl	OVENU AVE.	Los Angeles	(A- Stato	90047
Business phone: 333789				~:fh
CHECK HERE IF YOU ARE A	A PAID SPEAKER AN	D PROVIDE CLIENT IN	FORMATION BEL	ow:
Client Name:				Phone #:
Client Address:Street		City	State	Zip

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Date 9-2-15		THE CITY COUNC			Council File No	., Agenda Item, or Case No.
I wish to speak before	e theC/Y	y Count				
·		e of City Agency, De		Committee or C	Council	
Do you wish to provide Name: Business or Organization	le general public o	omment, or to spea exman	∢ for or aga	inst a proposal	on the agenda	() Against proposal () General comments
Address:						
Business phone:	Street	Representing:	City Myse	14	State	Zip
CHECK HERE IF Y	OU ARE A PAID	SPEAKER AND P	ROVIDE C	LIENT INFOR	MATION BELO	ow:
Client Name:			VIII. 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 -		P	hone #:
Client Address:	Street	Add the state of t	City		State	Zip

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Date 9/2/2015		COUNCIL'S RULES OF WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.
I wish to speak before the	City Coun	cí\		
	Name of City Ager	ncy, Department, Committee or C	ouncil	
Name: Hamid As	ssian	speak for or against a proposal		() Against proposal () General comments
Business or Organization Affil	iation: Fant & W	later Watch North Hollywood City		
Address: 11231 C	Hsego St,#311	North Hollywood	CA	91601
Street) '	City	State	Zip
Business phone:	Represe	nting:		
·	,	AND PROVIDE CLIENT INFOR	MATION BEL	.ow:
Client Name:				Phone #:
Client Address:Street				
Street		City	State	7in

CITY OF LOS ANGELES SPEAKER CARD-CONSTITUTION

YOU ARE NOT REQ	PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE. PUIRED TO PROVIDE PERSONAL INFORMATION IN ORDER TO SPEAK, TENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU	
Date 1015	THE CITY COUNCIL'S RULES OF ADA Council File No., Agendantem, DECORUM WILL BE ENFORCED. CIV VISh to	or Case No.
I wish to speak before the		
/ Nam	ne of City Agency, Department, Committee or Council	
Do you wish to provide general public of		posal it proposal al comments
Business or Organization Affiliation:	CONSTITUTION	100 to
Address:		
Street Business phone:	Representing: City State Zip	ON'
	SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	
Client Name: What is	the supreme Law! besid	es=
Client Address: Street	State 549	54.3.0
Please see reverse of card for impo	ortant information and submit this entire card to the presiding officer or cha	irperson.

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9-2-15	THE CITY COUNC		Council F	ile No., Agenda	ltem, or Case No.
I wish to speak before the	Name of City Agency, De		ttee or Council		
Do you wish to provide general p	oublic comment, or to speak	•		() A	or proposal gainst proposal Seneral comments
Business or Organization Affiliati	on: SJ Cyc		g.	*	Q ZULL
Address: 10566 1 Street Business phone: 818 38	36389 Representing:	City	State State	Z	(1)1 <u>1</u>
CHECK HERE IF YOU ARE A			INFORMATION E	BELOW:	
Client Name:				Phone #	•
Client Address:Street		City	State	Z	p

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	1			
Date	THE CITY COUNG	CIL'S RULES OF	Council File	No., Agenda item, or Case No.
9/415	DECORUM WILL	BE ENFORCED.	(41)	15-002-593
I wish to speak before the	City Canal			
	Name of City Agency, De	epartment, Committ	ee or Council	
Do you wish to provide general	public comment, or to spea	k for or against a pr	roposal on the agen	da? 🏹 For proposal () Against proposal
Name: Samuel Syl	Cofor			() General comments
Business or Organization Affiliat	ion: <u>Sierra Clu</u>	6		
Address: <u>54 5- Ho</u> Street	hart Blud #367	4	<u></u>	90cq
Business phone: Street	Representing:	City Su ordan (State (lyb)	Zip
CHECK HERE IF YOU ARE		ROVIDE CLIENT	INFORMATION BE	LOW: 2(3-)2)
Client Name: Svova (1	ûb			Phone #: 213- 38 65 28
Client Address: 714 W.C	trust 13/w 4/00	W	A	9 cd5
Street		City	State	Zip

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Date 2	2015	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before t				
	Nan	ne of City Agency, Department, Committee	e or Council	
Do you wish to provide	general public	comment, or to speak for or against a pro	posal on the agenda	? () For proposal
Name:	Br	van Barajas		() Against proposal () General comments
Busine s s or Organizatio	n Affiliation:	V		
Address:				
Address:	eet	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF YOU	J ARE A PAIC	SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELC	ow:
Client Name:			P	hone #:
Client Address:				
Stro	eet	City	State	Zip

Do you wish to provide general public comment or a speak for or against a proposal on the agenda? Name: 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:		PUBLIC DOCUMENT SUBJECT TO POSTING (QUIRED TO PROVIDE PERSONAL INFORMAT		
DECORUM WILL BE ENFORCED. I wish to speak before the Name of City Agency, Department, Committee or Council Do you wish to provide general public comment or a speak for against a proposal on the agenda? Name: 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:				
I wish to speak before the Name of City Agency, Department, Committee or Council	Date	THE CITY COUNCIL'S RULES OF	Council File No.,	, Agenda Item, or Case No.
Do you wish to provide general public comment or a speak for or against a proposal on the agenda? Name: 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:		DECORUM WILL BE ENFORCED.		
Do you wish to provide general public comment or to speak for or against a proposal on the agenda? Street City State Zip	I wish to speak before the			<i></i>
Name: 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:	ļia,	me of City Agency, Department, Committee	or Council	_
Name: 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:	Do you wish to provide general public	comment or to speak for or against a propo	osal on the agenda?	
Address: Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	Name:		6	() General comments
Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	N "			
Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	Address:			
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	Business phone:	Representing:	Marie Control of the	
Client Name: Phone #:	CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT INF	FORMATION BELO	w:
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Client Address:	Client Address:	City	State	Zio

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Date 9/1//5	THE CITY COUNCIL'S RULES O		o., Agenda Item, or Case No.
(12)	DECORUM WILL BE ENFORCED	· ·	<i>1</i> /
I wish to speak before the	A. City Council		
	Name of City Agency, Department, Com-	mittee or Council	
Do you wish to provide general positions $VESSEV$.	public comment, or to speak for or against	a proposal on the agenda	1? (X) For proposal () Against proposal () General comments
	*		_
Business or Organization Affiliati	ion: COMITON FOR A JAH	E GUUIRONA	ent
Address: 1601 N. W	LOUNGONN ALL STE A	Wilmwood	CA 90744
Street	City	State	Zip
Business phone: 310 764-1.	265 Representing: ENVI RONMO	est Justice C	onnuvited
	A PAID SPEAKER AND PROVIDE CLIEF		
Client Name:			Phone #:
Client Address:		01-1	7
Street	City	State	Zip

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Date	THE CITY COUNCIL	S RULES OF	Council File No., Agenda Item, or Case No.		
9/2/15	DECORUM WILL BE	ENFORCED.	4(
I wish to speak before the					
	Name of City Agency, Depa	rtment, Committee or C	Council		
Do you wish to provide general	public comment, or to speak fo	or or against a proposal	on the agenda?	() For proposal	
Name: (ESCIE	SINON			Against proposal General comments	
Business or Organization Affilia	ion:	***************************************			
Address: 5065	ALHAMA DR.	woodcano Hic	LS CD	71364	
Business phone: <u>816-6</u>					
CHECK HERE IF YOU ARE					
Client Name:			Ph	one #:	
Client Address:					
Street	Ci	íV	State	Zip	