15-0160-5347

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING (T REQUIRED TO PROVIDE PERSONAL INFORMAT HE EXTENT NECESSARY FOR THE PRESIDING OF	ON IN ORDER TO S	PEAK,	
Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	I File No., Agenda Item, or Case No.	
I wish to speak before the	Name of City Agency, Department, Committee	or Council	0	
	ublic comment, or to speak for or against a propo			
Business or Organization Affiliation	on:			
Address:Street				
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	
Please see reverse of card for	or important information and submit this entire car	d to the presiding o	officer or chairperson.	

YOU ARE N	S IS A PUBLIC DOCUMENT SUBJECT TO POSTING OT REQUIRED TO PROVIDE PERSONAL INFORMA THE EXTENT NECESSARY FOR THE PRESIDING O	TION IN ORDER TO SP	EAK,
Date 10-7-15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Agenda Item, or Case No. or OvrR
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
	public comment, or to speak for or against a prop	oosal on the agenda?	() For proposal() Against proposal
Name:	EVIC Preven		() General comments
	tion:		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW	N:
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip
Please see reverse of card	for important information and submit this entire ca	ard to the presiding of	ficer or chairperson.

YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJECT TO POSTING OT REQUIRED TO PROVIDE PERSONAL INFORMA THE EXTENT NECESSARY FOR THE PRESIDING O	TION IN ORDER TO S	PEAK,
Date 10/7/19	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	
	public comment, or to speak for or against a prop	posal on the agenda?	For proposal
Name: John [NALST		Against proposalGeneral comments
Business or Organization Affiliat	ion:		
Address: L	, A City		
			Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:		PI	none #:
Client Address:			
Street	City	State	Zip

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

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 BULES OF 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 to speak for or against a proposal on the agenda? () For proposal Against proposal General comments 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: Client Name: Phone #: Client Address: Street City State Zip

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date	THE CITY COUNCIL'S RULES OF Co		ouncil File No., Agenda Item, or Case No.	
10-7-15	DECORUM WILL BE ENFORCED.		I-W	
I wish to speak before the				
	Name of City Agency, Department, Committ	tee or Council		
	public comment, or to speak for or against a pl	roposal on the ager	nda?()For proposal ()Against proposal	
Name: JOSE P	6592		() General comments	
Business or Organization Affiliation	on:			
Address: 42095	onset de LA City	Ca	90027 Zip	
Business phone:	Representing:			
	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BI	ELOW:	
Client Name:			_ Phone #:	
Client Address: Street	City	State	Zip	

YOU ARE NOT F	REQUIRED TO PROV	NT SUBJECT TO POSTING IDE PERSONAL INFORMA IV FOR THE PRESIDING O	TION IN ORDER TO S	PEAK,	
Date 10-7-15		UNCIL'S RULES OF ILL BE ENFORCED.	Council File No.	Council File No., Agenda Item, or Case No.	
I wish to speak before theN		, Department, Committee	e or Council		
Do you wish to provide general pub Name: <u>Thelma Mor</u>		peak for or against a pro	posal on the agenda?	 () For proposal () Against proposal () General comments 	
Business or Organization Affiliation:					
Address: 14982 Pade Street	lock st	Sylmar City	CA State	91342 Zip	
Business phone: <u>\$18-601-00</u>	58 Representi	ng:			
CHECK HERE IF YOU ARE A P	AID SPEAKER AN	ID PROVIDE CLIENT IN	IFORMATION BELO	w:	
Client Name:			Pł	none #:	
Client Address:Street		City	State	Zip	
Please see reverse of card for in	mportant informatior	n and submit this entire c	ard to the presiding o	fficer or chairperson.	