## 15-0728, 15-0600-536

# CITY OF LOS ANGELES SPEAKER CARD 14-0268-54

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EXCEPT TO THE	EXTENT NECESSART FOR IT	IL PALSIDING OFFICER TO	CALL OF ON TO	50
Date 4 20 16	THE CITY COUNCIL'S DECORUM WILL BE E	110220 01	ncil File No., Ager	nda Item, or Case No.
I wish to speak before the	Name of City Agency, Departs	ment, Committee or Council		
Do you wish to provide general pul		or against a proposal on the	agenda? (	For proposal
Name: WALTON	SENTERFUT,	T	(×)	Against proposal General comments
Business or Organization Affiliation	: L.A. Tenan	& Union		
Address: 2427 Mich	igan de. L	A C	A 9	00 3 Zip
Business phone:				
CHECK HERE IF YOU ARE A		IDE CLIENT INFORMATIO	N BELOW:	
Client Name:			Phone	#:
Client Address:	City	Ct	tate	7in
Street	City	Şi	late	Zip

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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  Council File No., Agenda			lo., Agenda Item, or Case No.	
I wish to speak before the	Name of City Agency	nitee Sp., Department, Co	mmittee or C	Meeting ouncil J	
Do you wish to provide general pu Name: Shela Dh		peak for or agains	st a proposal	on the agend	a? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization Affiliation	n:				
Address: 2700 Ell.	endale PI.	#306	LA	CA	90007
Street Business phone: 213-373		- 7		State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AN	D PROVIDE CLI	ENT INFOR	MATION BEL	.ow:
Client Name:					Phone #:
Client Address:		City		State	Zip

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Date 4/20/2016	THE CITY COUNCIL'S RULES DECORUM WILL BE ENFORCE	0.	Council File No., A	genda Item, or Case No.
I wish to speak before the 4	Name of City Agency, Department, Co	mmittee or Cou	ncil	
Do you wish to provide general pu	blic comment, or to speak for or agains	t a proposal on	the agenda?	( ) For proposal
Name: an dro	dubois -			Against proposal General comments
Business or Organization Affiliation	1: N/A			
Address: 1334 A	1. formusa Au	LA	State	9004-6 Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLI	ENT INFORMA	TION BELOW	<i>I</i> :
Client Name:			Pho	one #:
Client Address:Street	City		State	Zip

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Date	THE CITY COUNCIL'S R	5220 0.	Council Fil	e No., Agenda Ite	em, or Case No.
I wish to speak before the	A HUSING COMPLANT Name of City Agency, Department	-	ncil	77	Special
Smitte	al public comment, or to speak for or	against a proposal or	the age	( ) Aga	proposal inst proposal neral comments
Name: Dizerce  Business or Organization Affili	ation: Slan Row Jum	A Women's	Persy	, ,	
Address: 72 ( Street	6 6 st # 317 City	LAJUA	State	9002 (	, /
	Representing:				
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVID	E CLIENT INFORMA	ATION B	ELOW:	
Client Name:				_ Phone #: _	
Client Address:Street	City		State	Zin	

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Date 4/20/20/6	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 of	r Council	
Do you wish to provide general pub  Name: EDDIE G	lic comment, or to speak for or against a propo JAVOR NOXE   RETIRED (88	sal on the agenda?	( ) Against proposal     ( ) General comments
Address: HOMELESS Street	City	State	Zip
Business phone: North	Representing:		
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	w:
Client Name:		PI	hone #:
Client Address:			
Street	City	State	Zip

Discrete and and for important information and submit this entire card to the presiding officer or chairperson.

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Date 4-20-16	DECOI	TTY COUNCIL'S RULES OF RUM WILL BE ENFORCED.  Meeting	Council File No., # 2	Agenda Item, or Case No.
I wish to speak before the	e House	Agency, Department, Commi		
Do you wish to provide g	general public comment,	or to speak for or against a p	proposal on the agenda?	
Name:	Antoni	a) farun;		Against proposal     General comments
Business or Organization	Affiliation:	/ -		
Address:				
Stree	et	City	State	Zip
Business phone:	Rep	oresenting:		
CHECK HERE IF YOU	ARE A PAID SPEAK	ER AND PROVIDE CLIENT	INFORMATION BELOV	v:
Client Name:			Ph	one #:
Client Address:Stree	nt	City	State	Zip

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Date 6-20.16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the	N	0 "	
	Name of City Agency, Department, Committee o	r Council	***
Do you wish to provide general p	ublic comment, or to speak for or against a propos	sal on the agen	da? (X For proposal
Name: A MCCou	LEN		( ) Against proposal ( ) General comments
Business or Organization Affiliation	on: VetERNS - HomeLe	55 Mc:	
Address: 1850 Cha	ecke Mr La	State	95028
Business phone: 323-7	69.952 Representing: Vet's		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BE	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Pate 4.21.6	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	public comment, or to speak for or against a prop	osal on the agenda? ( ) For proposal
Name:	JAYNE From ENEINO	( ) Against proposal ( ) General comments
Business or Organization Affiliati	ion:	
Address:Street	A)+ Head = Pol	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION BELOW:
Client Name:	touse negro	Phone #:
Client Address:Street	CAtto	State Zip

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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCE		Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Con	TE Supp	ACREDA
Do you wish to provide general	public comment, or to speak for or against	a proposal on the agenda?	( ) For proposal
Name: MAWA			Against proposal     General comments
Business or Organization Affiliati	ion: SEW		
Address: 3641	BEETHOUSH 5	1 CA	90066
Business phone: 31056	252 Representing:	State	∠ip
	A PAID SPEAKER AND PROVIDE CLIE	NT INFORMATION BELOV	w:
Client Name:		Ph	one #:
Client Address:	City	State	Zip
01.000			

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Date 04/20/2016		COUNCIL'S RULES OF WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the		Committee  ncy, Department, Committee or	Council	
Do you wish to provide general Name: Saldin	iar			( ) Against proposal (★) General comments
Business or Organization Affiliati	ion: ACA, L	AT.A.Y , U.T.A.		
Address: 6770 Yuc	ca 87. #A	Los Angeles	CA	90078
Business or Organization Affiliation Address: 6770 You Street  Business phone: 323-637-	8052 Represe	nting: Yuca - Argyle	State	to Association
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT INFO	RMATION BE	LOW:
Client Name:				Phone #:
Client Address:		City	State	Zip

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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.
I wish to speak before the	Housing Cormi tylee Name of City Agency, Department, Committee	e or Council	
	public comment, or to speak for or against a pro	pposal on the agend	a? ( For proposal ( ) Against proposal ( ) General comments
Address: 308 E 94 Street	h St Los Angeles	CA State	90015 Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BEL	LOW:
Client Name:			Phone #:
Client Address:	City	State	7in

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Date 4/20/16	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, Commit	ttee or Council
Do you wish to provide general p	oublic comment, or to speak for or against a p	proposal on the agenda? ( ) For proposal
Name: Sylvie.		( ) Against proposal ( ) General comments
Business or Organization Affiliation	on:	
Address: Po Box 99	is Los Angeles	CiA 90078 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 20 APR 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	7	No., Agenda Item, or Case No.
	ame of City Agency, Department, Comm		
Do you wish to provide general publi	ic comment, or to speak for or against a	a proposal on the agen	ida? ( ) For proposal Against proposal ( ) General comments
Business or Organization Affiliation:			
Address: 2263 5, AK	RUARD BLA CA City	C A State	9001S-2143 Zip
Business phone: 323 732 93 CHECK HERE IF YOU ARE A PA	Representing:AID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BE	ELOW:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

I fee investigation and submit this entire card to the presiding officer or chairperson.

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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		genda Item, or Case No.
I wish to speak before the	Housing Committee  Name of City Agency, Department, Committee or	Council	
Name: Jim Bic	bublic comment, or to speak for or against a propose that the constant on: Office of Councilment		) Against proposal General comments
Address: 200 N	Spring St. LA 900	0/2 State	Zip
	7005 Representing: Councilmenter		
	A PAID SPEAKER AND PROVIDE CLIENT INFO		(a
Client Name:		Pno	ne #:
Street	City	State	Zip