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Date 1. W.IQ	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	tee or Council
Do you wish to provide gene	eral public comment, or to speak for or against a p	roposal on the agenda? For proposal
Name:	PODENFORD	() Against proposal () General comments
Business or Organization Aff	filiation: OLNCH	
Address:		
Street	City	State Zip
Business phone:	Representing:	
	RE A PAID SPEAKER AND PROVIDE CLIENT	
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 1/20/16		COUNCIL'S RULES OF M WILL BE ENFORCED.	11-000 1 A. 16-	Agenda Item, or Case No.
wish to speak before the	Name of City Ac	ency, Department, Comm	ittee or Council	
Do you wish to provide general Name: へん	public comment, or	to speak for or against a		For proposal () Against proposal () General comments
Business or Organization Affiliat	ion: 754rd	LA LA	(A	90065
Address: Street	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City	State	Zip
Business phone:		senting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIEN	T INFORMATION BELO	w:
Client Name:			Pl	none #:
Client Address:		City	State	Zip

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		[-/
Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
20 JAN, 2016	DECORUM WILL BE ENFORCED.	ALL .
wish to speak before the	HOUSING COMMITTEE	
	Name of City Agency, Department, Committee	or Council
	ublic comment, or to speak for or against a prop	() Against proposal
Name: RABEYA SE	.0	(-) General comments
Business or Organization Affiliatio	n: ESPERANZA COMMUNITY H	ousing Curp
Address:Street		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 1/20/16	THE CITY COUNC		Council File No	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, De	epartment, Committee	or Council	Kasan)
Do you wish to provide general p	oublic comment, or to speal	k for or against a prop	osal on the agenda	? () For proposal
Name: Adam	Cowing			() Against proposal () General comments
Business or Organization Affiliati	on: Tublic	(01	Inscl	
Address: 6 0	South Av	d move,	LA, C	A 90005
Business phone:	Representing:			
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND P	ROVIDE CLIENT INI	FORMATION BELO	ow:
Client Name:			P	hone #:
Client Address:Street		City	State	Zip

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Date 1/201/6	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	or Council
Do you wish to provide general p Name: Lahlmh Mann	oublic comment, or to speak for or against a propo	sal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliati	child hard of bushalon	- Unted way of Greater LA
Address: // Street	City	J CA 90004 State Zip
Business phone: 2/3-708-	-6720 Representing:mred wa	4
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

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1-20-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	enda Item, or Case No.
I wish to speak before the	Housing Committee Name of City Agency, Department, Committee		
Do you wish to provide general Name:Christine	public comment, or to speak for or against a prop	osal on the agenda? (() For proposal) Against proposal) General comments
Business or Organization Affiliat	ion:BIA		
	S. Bixel St. Los Any	geles	
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT IN		
Client Name:		Phor	ne #:
Client Address:	City	State	Zip

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1-20-/		THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before		of City Agency, Department, Committee	e or Council	
Do you wish to provide		nment, or to speak for or against a pro	posal on the agenda? (For proposal) Against proposal
Name: / DN	y Sal	azaV	() General comments
Business or Organizat	ion Affiliation:	Cormack Baron	Salar	ar
Address: 80 (S. Gra	end LA	State	900/1
Business phone: 23	6-2660	Representing: WBS	State	210
CHECK HERE IF YO		PEAKER AND PROVIDE CLIENT IN	IFORMATION BELOW	<i>t</i> :
Client Name:			Pho	ne #:
Client Address:	reet	City	State	Zip
OI.	1001	City	Glate	ZIP

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Date 1 20 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	nda Item, or Case No.
wish to speak before the			
	Name of City Agency Department, Committe	e or Council	
Do you wish to provide genera	al public comment, or to speak for or against a pro	posal on the agenda? (Against proposal
Name:	10/19/12/500		General comments
Business or Organization Affilia	ation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT IN		e #:
Client Address:	City	State	Zip

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Date	THE CITY CO	UNCIL'S RULES	OF	Council File No	., Agenda Item, or Case	No.
01.20.16	DECORUM W	ILL BE ENFORCE	ĒD.	Item 1		
I wish to speak before theH	Name of City Agency	mmittee Department, Con	mmittee or C	Council		
Do you wish to provide general	public comment, or to sp	peak for or agains	t a proposal	on the agenda	? XX For proposal	
Name: Katherine	Costa				() Against propo () General comn	
Business or Organization Affiliati	on: Modative					
Address: 3221 Hut (chison ave	Los Ange	cles	State	90034 Zip	
Business phone: (888) 36	8-2721 Representi	ng: Modat	ive			
CHECK HERE IF YOU ARE A				MATION BELO	ow:	
Client Name:				F	Phone #:	
Client Address:		C'A.		Chaha	7:	
Street		City		State	Zip	

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Date /20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	le 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 genera	I public comment, or to speak for or against a prop	osal on the age	enda? For proposal
Name: Acron	Smerut		() Against proposal () General comments
	ation: Central (ety Association		
Address: 626 Wil	shire Blud Los Angeles	CA	90017
Business phone: 213 41	Shire Blud Los Vangeles City 6-75/2 Representing: CCA	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INI	FORMATION E	BELOW:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 1-20 -16		COUNCIL'S RULES OF WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the		Cammiltee oncy, Department, Committee o	or Council	
Do you wish to provide general	public comment, or to	speak for or against a propo	sal on the agenda	
Name: Rey Fut	vda			() Against proposal() General comments
Business or Organization Affiliat	tion: Little	To kyo Servis	Center	
Address: 231 E. 3	\$3rd st	Los Angeles	State	908 (2 Zip
Business phone:		nting:		
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:			P	hone #:
Client Address:		City	State	7in

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Date /	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
1/20/2016	DECORUM WILL BE ENFORCED.	1TEM 1
I wish to speak before the	Housing Committee	
	Name of City Agency, Department, Committee	e or Council
Do you wish to provide general p	public comment, or to speak for or against a pro $le arrho le arrho $	pposal on the agenda? For proposal () Against proposal () General comments
	on: So Cal Assoc of Non Pr	of. + Housing
Business phone: (Street 7/3)480	City Representing:	State Zip
	A PAID SPEAKER AND PROVIDE CLIENT I	
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 1/20/2016		OUNCIL'S RULES OF VILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
wish to speak before the		y, Department, Committee of	or Council	
Do you wish to provide gener			sal on the agenda	() For proposal () Against proposal () General comments
Business or Organization Affil	liation: SKID ROW	HOUSING TRUST		
Address: 1317 E. Street	ITM STREET	City City	CA State	9002 (Zip
Business phone: 213-68	3-0522 Represen	ting:		
CHECK HERE IF YOU ARE	E A PAID SPEAKER A	ND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:Street	<u> </u>			
Street		City	State	Zip

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Date 1/20/16		CORUM WILL BE ENFORCED. Council File No., Ag		o., Agenda Item, o	genda Item, or Case No.	
wish to speak before the _	Name of City Agency, Depa		Council			
Do you wish to provide gen	eral public comment, or to speak for			(`) Against	oosal proposal I comments	
Business or Organization Af	filiation: CRA16 LAG					
Address: 32.	21 HUTLHISON C	LA ity	C A State	Zip		
Business phone: 310 83	82400 Representing:	By CLC				
CHECK HERE IF YOU A	RE A PAID SPEAKER AND PRO	OVIDE CLIENT INFOR	RMATION BEL	ow:		
Client Name:				Phone #:		
Client Address:	C	itv	State	Zip		

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Date 100/19 I wish to speak before the	Name of City Agency, Department, Committee of	1-7	Io., Agenda Item, or Case No.
Name:A	ral public comment, or to speak for or against a propo	sal on the agend	a? () For proposal () Against proposal () General comments
Business or Organization Affi	Mation: LA Chamber		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 1 20/16	THE CITY COUND		Council File N	o., Agenda Item, or Case No.
I wish to speak before the	-	epartment, Committee or (Council	
Do you wish to provide general	public comment, or to spea	k for or against a proposa	I on the agenda	a? () For proposal
Name: GU	Y PENINI			() Against proposal () General comments
Business or Organization Affilia	tion:			
Address: 526 Street Business phone:	HARPER	LOS ANGELES	State	90046
Business phone:	Representing:	SELF	Otate	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND P	ROVIDE CLIENT INFOR	RMATION BEL	ow:
Client Name:				Phone #:
Client Address:Street		City	State	Zip

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EXCEPT TO TH	E EXTENT NECESSARY FOR THE PRESIDING O	OFFICER TO CALL UPON YOU	7
Date 1/20/10	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	0.
I wish to speak before the	Name of City Agency, Department, Committee	e or Council	
Name: MATTHEV	ublic comment, or to speak for or against a pro	pposal on the agenda? () For proposal () Against proposa () General comme	
Business or Organization Affiliation			
Address: 755 N/ C	AND A IS	70076	
Street Business phone:	Representing: City	State Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:	
Client Name:		Phone #:	
Client Address:			
Street	City	State Zip	

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Date 1/20116 I wish to speak before the	Name of City Agency, Department, Committee	1	Agenda Item, or Case No.
Name: PATILIA M Business or Organization Affiliati	oublic comment, or to speak for or against a property on: AM	oposal on the agenda?	() For proposal () Against proposal () General comments
Address: Street Business phone: 23	City Representing:	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW	/:
Client Name:		Pho	one #:
Client Address:	City	State	Zip

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Date Jaway 20, 2	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCED	1	Council File No., Agenda Item, or Case No	
wish to speak before the	mannon	mittee or Council		
Do you wish to provide genera	I public comment, or to speak for or against	a proposal on the agenda?	() For proposal	
Name: Bry	ean Barajas		Against proposal General comments	
Business or Organization Affilia	ation:			
Address:				
Street Business phone:	City	State	Zip	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	NT INFORMATION BELOV	w:	
Client Name:		Ph	one #:	
Client Address:				
Street	City	State	Zip	