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Date 9.72-17	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 Name:	al public comment, or to speak for or against a propo	() Against proposal
Business or Organization Affilia	ation: EPAC	
Address: 5(9)	Ewing St 900	Z6 State Zip
Business phone:	Representing: EVN (i do fash
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION 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 chairporeses

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8-22-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	, Agenda Item, or Case No.
I wish to speak before the	Health Education NCs Name of City Agency, Department Committee of	r Council	
Do you wish to provide general	public comment, or to speak for or against a propo-	sal on the agenda?	() For proposal
Name: Glenn	Bailey, President, Nor ion: Valley Alliance of No	thridge East	General comments
Business or Organization Affiliati	ion: Valley Alliance of NO	25	
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	W:
Client Name:		Ph	hone #:
Client Address:			
Street	City	State	Zip

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Date 8/22/2017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	1	lo., Agenda Item, or Case No.
I wish to speak before the/	Name of City Agency, Department, Committee o	HOOD COU or Council	a)C145
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agend	a? (X) For proposal
Name: ANN Ja	D B		() Against proposal () General comments
Business or Organization Affiliation	on: Symax NC		
Address: 14047 Can	City YEM AR	CA	91342
Business phone: Street	9318 Representing: SELF	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 8/22/2017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	5	o., Agenda Item, or Case No.
I wish to speak before the	earth Edwaln + NC Committee	6	
	Name of City Agency, Department, Committee	or Council	
Name: ANNE-MARE			() For proposal () Against proposal () General comments
Business or Organization Affiliat	tion: SILVER LAKE MEIGHBORHOOD	COUNNAL	
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF		
Ollent Name.			TIONE #
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