Date: 04/05/2017

I wish to speak before the Council

Council File No., Agenda Item, or Case

Item NO. (2) - 15-1038

Do you wish to provid	le general public comment, or to s	peak for or against a proposal on the agenda? Ger	neral Comment	
Name: Ofcr Bior	ndo			
Business or Organiza	tion Affiliation: LAPD			
Address:	1546MLK BI	Los Angeles	CA	90062
	Street	City	State	Zip
Business Phone: 21	138475800	Representing: LAPD		
CHECK HERE IF YO	U ARE A PAID SPEAKER AND P	PROVIDE CLIENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				
	Street	City	State	Zip

Date: 04/05/2017

I wish to speak before the Council

Council File No., Agenda Item, or Case

Item NO. (2) - 15-1038

Do you wish to pro	ovide general public comment, or to s	speak for or against a proposal on the agenda? (General Comment	
Name: Leving	ston			
Business or Organ	nization Affiliation: City Of La			
Address:	100 W 1st	Los Angeles	Ca	90012
	Street	City	State	Zip
Business Phone:	2134860910	Representing: City Of La		
CHECK HERE IF	YOU ARE A PAID SPEAKER AND F	PROVIDE CLIENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address: _	Street	City	State	7in

Date: 04/05/2017

I wish to speak before the Council

Council File No., Agenda Item, or Case

Item NO. (2) - 15-1038

Do you w	rish to provide general public comment, or to speak for or ag	ainst a proposal on the agenda? G	eneral Comment	
Name: _	FRANK			
Business	or Organization Affiliation: WEISER			
Address:	3460 WILSHIRE BLVD. STE. 1212	Los Angeles	CA	90010
	Street	City	State	Zip
Business	Phone: 213 384 6964 Representii	ng:_APPELANT		
CHECK I	HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BELOW: X		
Client Na	me: BALUHBHAI PATEL		Phone#: <u>213</u>	3 3862286
Client Ac	ldress:			
	Street	City	State	Zip

Date: 04/05/2017

Council File No., Agenda Item, or Case

Item NO. (2) - 15-1038

Do you wish to provide general	cii public comment, or to speak for or agai	nst a proposal on the agenda? (General Comment	
Name: Juancho				
Business or Organization Affiliat	ion:			
Address:				
	Street	City	State	Zip
Business Phone:	Representing	j:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				
	Street	City	State	Zip

NOTE: INFORMATION PROVIDED WILL BE MADE PART OF THE PUBLIC RECORD