15-1138

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(DNB)

Date 11 - 17 -	THE CITY COUNCIL'S RUDECORUM WILL BE ENF		ile No., Agenda Item, or Case No.
I wish to speak before the			
	Name of City Agency, Departmen	nt, Committee or Council	
Do you wish to provide ge Name: Ruth	neral public comment, or to speak for or a	against a proposal on the age	enda? ( ) For proposal ( ) Against proposal ( ) General comments
Business or Organization	Affiliation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU	ARE A PAID SPEAKER AND PROVIDE	E CLIENT INFORMATION E	BELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	No. of City Assessment Committee	an Council
	Name of City Agency, Department, Committee blic comment, or to speak for or against a pro	
Business or Organization Affiliation	30×86502, LA	
Street Street Street 213 200	Representing:	State Zip
	PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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DNG)

Date	THE CITY COUNCIL'S RULES OF	Council/File No., Ag	genda Item, or Case No.
N-10 11-17-15	DECORUM WILL BE ENFORCED.	14	
I wish to speak before the	SACC		
	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general p	public comment, or to speak for or against a proposa	- /	) For proposal ) Against proposal
Name:	Antonia Memores	(	) General comments
Business or Organization Affiliati	on:		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW	:
Client Name:		Pho	ne #:
Client Address:	City	State	Zip

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Date 1 1 7 1 5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File, No., A	genda Item, or Case No.
I wish to speak before the	A. City Councel	Council	
	ne of City Agency, Department, Committee or comment, or to speak for or against a proposa		( ) For proposal ( ) Against proposal
Name: SUSIE Sha	nnon	<del></del>	( ) General comments
Business or Organization Affiliation:	roverty Watter	> > 5	
Address:Street Business phone: 213 - 880 - 306	City	State	Zip
	SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW	/:
Client Name:		Pho	one #:
Client Address:	City	Stato	Zin

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
11172015	DECORUM WILL BE ENFORCED.	1 + C M 14
I wish to speak before the		
Nan	ne of City Agency, Department, Committee	or Council
60 MM	comment, or to speak for or against a prop	( ) Against proposal
Name:		( ) General comments
Business or Organization Affiliation:		21 .
Address: Street	7 Laverl	Carr 9166
Business phone:		
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address: Street	FA h 1 L L X	Wood 91607

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		_		
Date 11115	THE CITY COUNCIL'S DECORUM WILL BE	RULES OF ENFORCED.	Council File No., A	genda Item, or Case No.
I wish to speak before the	City Courcil			
	Name of City Agency, Depart	ment, Committee or C	ouncil	
Do you wish to provide general	public comment, or to speak for	or against a proposal	on the agenda?	( ) For proposal
Name: VAMICIA /	16 Alli Ster			(X) Against proposal ( ) General comments
Business or Organization Affiliat	ion: A A			
Address: VD box	86562	Lt, CA	90086	
Business phone: (Street)	Representing:	ALA	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROV	/IDE CLIENT INFORI	MATION BELOW	/:
Client Name:			Pho	one #:
Client Address:	City	,	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No	., Agenda Item, or Case No.
1 1111115	DECORUM WILL BE ENFORCED.	14	
I wish to speak before the	City Council		
	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general p	public comment, or to speak for or against a proposa	al on the agenda	? ( ) For proposal
			( Against proposal
Name: Jawes Po(+	ev .		( ) General comments
Business or Organization Affiliation	on: LACAN		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	OW: L
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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19 NOV 1	5	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before t		me of City Agency, Department, Committee of		
	1441	no or only rigoros, population, committee	71 Octainon	
Do you wish to provide	general public	comment, or to speak for or against a propo	sal on the agenda	? ( ) For proposal
Name:	ARIC	LIPMAN		( ) Against proposal     ( ) General comments -
Business or Organization	on Affiliation:			
Address:				
Address:Str	eet	City	State	Zip
Business phone:		Representing:		
		D SPEAKER AND PROVIDE CLIENT INF		
Client Name:			P	Phone #:
Client Address:	eet	City	State	7in

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Date 7///-		CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
11/1	/ DECO	RUM WILL BE ENFORCED.	#	
/ 	L -	(t)	bUN(1	/
I wish to speak before t		Agency, Department, Comm		
		/		2 ( ) For proposal
Do you wish to provide	general public comment	t, or to speak for or/against a	proposal on the agenda?	(1) Against proposal
Name:	JOHN U	NT LST		( ) General comments
Business or Organization	on Affiliation:			
Address:	Att			
Str	eet	City	State	Zip
Business phone:	Re	presenting:		
CHECK HERE IF YOU	J ARE A PAID SPEAR	CER AND PROVIDE CLIENT	INFORMATION BELO	w:
Client Name:			P	hone #:
Client Address:				
Str.	eet	City	State	Zip

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Date 17/2015  I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.  (O UM)  ame of City Agency, Department, Committee	Council File No., Agenda Item, or Case No.
	ic comment, or to speak for or against a prop	/ \ Against proposal
Address:Street	City	State Zip
Business phone:		
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT IN	IFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

	-			
Date	THE CITY COU	NCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
	DECORUM WIL	L BE ENFORCED.	114	B
I wish to speak before the	L.A. CHy	Councel		
	Name of City Agency,	Department, Committe	e or Council	
Do you wish to provide general			pposal on the agenda	a? ( ) For proposal ( ) Against proposal
Name: Andre	a Mcter	son		( ) General comments
Business or Organization Affiliati	ion: Poverty	Matter	<u> </u>	
Address:	lter) 0	City	State	Zip
Business phone:	Representino	•	State	Σip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND	PROVIDE CLIENT II	NFORMATION BEL	ow:
Client Name:				Phone #:
Client Address:		Citv	State	Zip

CITY OF LOS ANGELES SPEAKER CARD 15-6727
IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE
T REQUIRED TO PROVIDE PERCONAL PUBLIC PUBLIC PROVIDE PERCONAL PUBLIC NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CIT 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	THE CITY COUNCIL' DECORUM WILL BE		Council File	No., Agenda Item, or	Case No.
wish to speak before the	1				
	Name of City Agency, Depar	tment, Committee or (	Council		
Do you wish to provide general p	,	r or against a proposa	on the agenc	la? ( ) For propo ( ) Against p	osal oroposal
Name: Dornielle S	andoval			( ) General	comments
Business or Organization Affiliation	on: CA Angeles	Budget Ad	vocate +	- Central	San
Address:				begno 1	1C
Street Business phone: <u>2/0 - 8 48</u>	Cit	у	State	Zip	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PRO	VIDE CLIENT INFOF	RMATION BEI	LOW:	
Client Name:				Phone #:	
Client Address:					
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EXCELLIO	THE EXTENT NEOLOGATITY ON	TIE T TIEGIDITA OTT	OLITTO CALL OF OR			
Date 11 17 (15	THE CITY COUNCIL'	S RULES OF	Council File No., Ag	genda Item, or Case No.		
	DECORUM WILL BE	ENFORCED.	14-18	3		
I wish to speak before the	CITY LOCA Name of City Agency, Depar		Council			
Do you wish to provide general	public comment, or to speak fo	r or against a propos	al on the agenda? (	) For proposal ) Against proposal		
Name: WACOMI	et morre	7	(	) General comments		
Business or Organization Affiliat	ion: SECV					
Address: 3841	BEETHOUSY	57,	cA, O	A 900lob		
Address: 3841  Street  Business phone: 310 52	Cit Cit 25 23 Representing:	SELT	State '	Zip		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:			Phoi	ne #:		
Client Address:						
Street	Cit	/	State	Zip		

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Date		INCIL'S RULES OF LL BE ENFORCED.		genda Item, or Case No.			
I wish to speak before the		uncil					
	Name of City Agency,	Department, Committee	e or Council				
Do you wish to provide generally	public comment, or to sp	eak for or against a pro	posal on the agenda?	) For proposal			
Name: Jonath	190 K/2)			<ul><li>) Against proposal</li><li>) General comments</li></ul>			
Business or Organization Affiliati Address: Street	on: CLUE						
Address: 464 1	-4Cas Ave	LA	90017				
Street		City	State	Zip			
Business phone:	Representin	g:		<del>-</del>			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:							
Client Name:			Pho	ne #:			
Client Address:Street		City	State	Zin			