

NOTE: THIS IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON THE CITY'S WEBSITE. 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

15-1541

Date 5, 6, 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
	ne of City Agency, Department, Committee	/	/
Do you wish to provide general public	comment for to speak for or against a prop	osal on the agenda?	() For proposal
Name:	from the	11/6 -	() Against proposal () General comments
Business of Organization Anniation.			
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A PAIL	SPEAKER AND PROVIDE CLIENT INF	FORMATION BELO	w:
Client Name:		Ph	one #:
Client Address:			
Street	City	State	Zip

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Date 5/6/16	THE CITY COUNCIL'S DECORUM WILL BE I			, Agenda Item, or Case No.		
I wish to speak before the	Name of City Agency, Depart		ouncil			
Do you wish to provide general p	oublic comment, or to speak for	or against a proposal	on the agenda	? (For proposal		
Name: RICHARO	ESCUTIA			() Against proposal () General comments		
Business or Organization Affiliation	on: OISTRICT	9 5UPPO	RT GR	OUP		
Address: 36923 9 Street Business phone 626 99/ -	O69 O Representing:	0	State	ZIP		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:			P	hone #:		
Client Address:	City		State	Zip		

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Date	THE CITY COUNCIL'S RULE	S OF Council File	e No., Agenda Item, or Case No.
	DECORUM WILL BE ENFOR	CED. \\\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	541(9+10)
I wish to speak before the	Name of City Agency, Department, C	Committee or Council (+	address aty monthing
	public comment, or to speak for or aga	inst a proposal on the ager	nda? () For proposal
Name: huahden	Starrett		() Against proposal () General comments
Business or Organization Affiliati	on: La Namt Within	7	
		A CA	9007
Address: 350 S Street Business phone: 313 091	7905 Representing: LAF	State	Zip *
	A PAID SPEAKER AND PROVIDE C	LIENT INFORMATION BI	ELOW:
Client Name: LAFC			Phone \$32549 432
Client Address: Street	Wilshin Blood City	State	<u>Won</u>

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Date 05/06/201	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item,	or Case No.
I wish to speak before theNa	me of City Agency, Department, Committee		
Do you wish to provide general public Name: RICHAPD L.	comment, or to speak for or against a prop	() Agains	oposal st proposal al comments
Business or Organization Affiliation:	DISTRICT 9 SUPPOR	T GROUP	
Address: 36023 42NP ST E	•	State Zip	52
Business phone: (651) 609-14	FSS Representing:		
CHECK HERE IF YOU ARE A PAI	ID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	

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Date 5/6/15	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee o		
Do you wish to provide general p	public comment, or to speak for or against a propos	sal on the agend	da? (TFor proposal
Name: FERNANDO			() Against proposal () General comments
Business or Organization Affiliation	on:		
Address: \$163 RED	LANDS ST PLAYA de Rey.	CA,	90293 Zip
Business phone: 310 745	S 6933 Representing:		·
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BE	LOW:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 5/6/16 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. LA CTY Council Name of City Agency, Department, Committee	Item "	o., Agenda Item, or Case No.
Do you wish to provide general p	oublic comment, or to speak for or against a propo		a? () For proposal () Against proposal () General comments
Business or Organization Affiliation			
Address: 520 Sol	1+h Mg/iposa +104 LA City	CA State	900 ZO Zip
Business phone: 310-69	2-7 <i>5</i> 69 Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	ow:
Client Name:		{	Phone #:
Client Address:Street	City	State	Zip

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5/4/2014	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	tee or Council
Do you wish to provide general p	oublic comment, or to speak for or against a p	roposal on the agenda?
Name: Structure	REYES	() Against proposal () General commer
Business or Organization Affiliation	on: Resident (Son	Some STAT HOOR
Address: 2550 GA	udde St. L.A.	CA 90033
Business phone:	1-456/ Representing: Stasoul C	Slate Zip
	A PAID SPEAKER AND PROVIDE CLIENT	
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 5-6-/6 I wish to speak before the City Name	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. OF L. A. DUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	/	lo., Agenda Item, or Case No.
Do you wish to provide general public co	omment, or to speak for or against a proposa	al on the agend	a? () For proposal () Against proposal () General comments
Business or Organization Affiliation:	LENC TOURSCIE		
Address: 1738 W 4334 Street	DEACE LA. City	State	90062 Zip
Business phone: 323-776-46	SY Representing:		
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 5 9 4	THE CITY COUNCI DECORUM WILL B		Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Dep	artment, Committee or	Council	
Do you wish to provide ger	neral public comment, or to speak	for or against a proposa	al on the agenda	? () For proposal
Name:	JOHN WAL	511		() Against proposal () General comments
Business or Organization A	Affiliation:			
Address:Street	L.A			
Street	(City	State	Zip
Business phone:	Representing:			
	RE A PAID SPEAKER AND PR			OW: Phone #:
Client Address:				
Street	(Dity	State	Zip

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Date S. G.	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., rigerida Item, or Case No.
I wish to speak before the	ne of City Agency, Department, Committee or	Council	
Α.	1	and the second s	a () For proposal
Name:	comment, or to speak for or against a propose	al on the agenda	() Against proposal () Ageneral comments
Business or Organization Affiliation:			
Address: Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip
0001	,		—·F

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Date 5/6/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the(City Council Name of City Agency, Department, Committee of	or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a propo	osal on the agenda	? (V) For proposal
Name: Robert Osba	orne		() Against proposal() General comments
<i>/</i> v	on: Los Angeles Memorial Colis	eum Comm	- ก์เรร [ั] เอก
	igueroa Street Los Amas	les CA C	70037
Business phone: 313-309	4100 Representing: Los Angelis Mama	rial Coliscu	in Commission
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip

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Date 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	Name of City Agency, Department, Committee or	Council	
Do you wish to provide general p	oublic comment, or to speak for on against a proposa	al on the agenda? () For proposal
	Evic Vreven) Against proposal) General comments
Business or Organization Affiliati	on:		
Address:Street	City	State	Zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT INFOR		
Client Name:		Pho	ne #:
Client Address:	City	State	Zip
0.1001	On j	Oldio	—-P

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	_					
Date 5 6 16	THE CITY COUNCIL		Council File No.	, Agenda Item, or Case No.		
3/4/14						
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 or against a proposal	on the agenda	? (X) For proposal Against proposal		
Name: Hehry N	guyen			() General comments		
Name: Hehry N Business or Organization Affilia	tion: LAFC					
Address: 475) W	ilshire Blvd.	A	900	010		
Street	C	ty	State	Zip		
Business phone: Representing:						
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:			P	hone #:		
Client Address:						
Street	С	ty	State	Zip		

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Date 5/6/16		TY COUNCIL'S RULES OF UM WILL BE ENFORCED.	Council File No	., Agenda Item, or Case No.
I wish to speak before the		agency, Department, Committee		_
Do you wish to provide general Name: 10m Penh	public comment, o	or to speak for or against a pr	oposal on the agenda	? For proposal () Against proposal () General comments
Business or Organization Affiliation Address: Street	ion: LAF wi)Shire	C Bly.	LA	90010
Street Business phone:		3.5,	State	Zip
CHECK HERE IF YOU ARE A	A PAID SPEAKE	R AND PROVIDE CLIENT I	NFORMATION BELO	ow:
Client Name:			P	Phone #:
Client Address:		City	State	Zip