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		TOUR TO OTHER OF OIL TOO
Date 2-17-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the Eng	exay and Environments Nambe of City Agency, Department, Committee of	Committee or Council
Name: MÓNICA RATLI		Against proposal () General comments
Business or Organization Affiliation:	LA UNIFIED SCHOOL D	1STRICT
Address: 333 South Bo	eaudry Avenue #24 LA	CA 90017 State Zip
Business phone (2/3) 24/-638	Representing: BOARD DISTRIC	CT 6
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
2.17.16	DECORUM WILL BE ENFORCED.	#/
I wish to speak before the	E \$ 5	
	Name of City Agency, Department, Committee	or Council
Do you wish to provide gener	ral public comment, or to speak for or against a prop	oosal on the agenda? () For proposal () Against proposal () General comments
	liation: CENTRAL CITY A	250C.
Address:Street	City	0-4-
	Representing:	State Zip
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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

Date 2/17/10	THE CITY COUNCI		Council File No.,	Agenda Item, or Case No.
I wish to speak before theC	Ommittee on Ex Name of City Agency, Dep	nevau & Envi	ronment	ma
Do you wish to provide general p		for or against a proposal	on the agenda?	() For proposal () Against proposal General comments
Business or Organization Affiliation	on: LAVSD			
Address: 333 S. Bo	eaudry Are.		0	
Business phone: 213.241.10	Representing:	LAVSD	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PR	OVIDE CLIENT INFOR	MATION BELOV	N:
Client Name:			Ph	one #:
Client Address:		City	State	Zip

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Date Feb 17, 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Enurgy + Environ ment Name of City Agency, Department, Committee of	
Do you wish to provide general Name:	public comment, or to speak for or against a propo	sal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affilia	tion: BIZFED (LA CONTY BUSI	ness tederation)
Address: 1000 N. Alam	ncda #240 LA City 9084 Representing: Biz Fed	CA 90012 State Zip
Business phone: 310 251	9084 Representing: Biz Fed	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 2/17/2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File f	No., Agenda Item, or Case No.
I wish to speak before the Every	ame of City Agency, Department, Committee o	r Council	
Do you wish to provide general publi	c comment, or to speak for or against a propos	sal on the agend	da? () For proposal
Name: JOSE Sutitive	7		() Against proposal () General comments
Business or Organization Affiliation:	LA Community Gorden Co	mal	
Address:	City	State	Zip
Business phone: (310) 739 -	3036 Representing: LACGC	State	ΖΙΡ
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEI	Low:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 2-17-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Nergy 4 Englowment Name of City Agency, Department, Committee	or Council
Do you wish to provide general Name: Wendy	public comment, or to speak for or against a prop	oosal on the agenda? (For proposal () Against proposal () General comments
Business or Organization Affiliat	ion: Silvra Club	
Address: 360 M	Washington IN L	A CA 90065 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 2-17-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	lo., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general put	blic comment, or to speak for or against a prop	osal on the agenda	a? () For proposal
Business or Organization Affiliation	COUNCIL FOR WAT		HEALTH
Address: Street	9945 Representing:	State	Zip
Business phone: 213 229	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT IN		
Client Name:			Phone #:
Street	Citv	State	Zip

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

Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal () Against proposal () Against proposal () General comment () General				
Name of City Agency, Department, Committee or Council Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal () Against proposal () Against proposal () General comment () General	Date 2-17-16		Council File No., Agenda Item, or Case I	No.
Name:	I wish to speak before the			
Name:			roposal on the agenda? () For proposal	ol.
Address:Street	Name: <u>Tesha</u>	Siler	() General comme	
Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Business or Organization Affiliat	ion: LA Food Policy (Council	
Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Address:	*		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #:	Street	City	State Zip	
Client Name: Phone #:	Business phone:	Representing:		
	CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:	
Client Address:	Client Name:		Phone #:	
Street City State Zip	Client Address:	City	State Zin	

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Date 2/17/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Energy + Environment Name of City Agency, Department, Committee	
Do you wish to provide general p	ublic comment, or to speak for or against a prop Line2 - CEO	oosal on the agenda? () For proposal () Against proposal () General comments
	on: Los Angeles Latino (Spring St. #600 Los City	Chamber of Commerce
Address: 634 N. Street	Spring St. #600 Los city	Angeles CA 900/2 State Zip
	OOOS Representing: LALCC	ECOMATION DELOW
Client Name:	PAID SPEAKER AND PROVIDE CLIENT IN	Phone #:
Client Address:	City	State Zip

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Date 2	16	6	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to	speak l	pefore the	Name of City Agency, Department, Committee	or Council	
Do you w			public domment, or to speak for or against a propo	osal on the agenda?	() For proposal() Against proposal() General comments
		anization Affiliati	ion:l		
Address:		Street	City	State	Zip
Business	phone		Representing:		
CHECK	HERE	IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	w:
Client Na	ame:			Ph	one #:
Client Ad	ldress:	Street	City	State	Zip

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2117	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCE	\
I wish to speak before the	Name of City Agency, Department, Com	nmittee or Council
Do you wish to provide gener	al public comment, or to speak for or against	t a proposal on the agenda? (>) For proposal () Against proposal () General comment
	iation: LA Area Chaymir	per of Comment
Address:Street	City	State Zip
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Representing:	
CHECK HERE IF YOU ARE	E A PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 2/17/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	FE Committee Name of City Agency, Department, Committee	ee or Council
Do you wish to provide genera	al public comment, or to speak for or against a pr	oposal on the agenda? (YFor proposal
Name: Adam Lane		() Against proposal
Business or Organization Affili	iation: LA Bushey Council	
Address:		
Address:Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE	E A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 2/17/1U	A CONTRACT CONTRACT	OUNCIL'S RULES OF WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Energy Name of City Ager	ENYWNMON+ cy, Department, Committe	Committee be or Council	2
Do you wish to provide general Name:	auis			() Against proposal () General comments
Business or Organization Affili Address: Street	ation: VICA	Man Sit	n ha	
Address: Street	S NEW (104)	City SV [16	State	Zip
Business phone:				
CHECK HERE IF YOU ARE	A PAID SPEAKER	AND PROVIDE CLIENT I	NFORMATION BELO	ow:
Client Name:			F	Phone #:
Client Address:		City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
217-16	DECORUM WILL BE ENFORCED.	15-1543
I wish to speak before the	Name of City Agency, Department, Committee	nonment tee or Council
Do you wish to provide ger	neral public comment, or to speak for or against a pr	roposal on the agenda? () For proposal () Against proposal
Name:	Jose peralta	() General comments
Business or Organization A	Affiliation:	
Address:Street		
Street	City	State Zip
Business phone:	Representing:	
CHECK HERE IF YOU	ARE A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date	THE CITY COUNCIL'S RULES	Council File N	lo., Agenda Item, or Case No.
2-17-16	DECORUM WILL BE ENFORCE	ED.	-1543
I wish to speak before the	Energy &	Brironment	
	Name of City Agency, Department, C	ommittee or Council	
Do you wish to provide ge	eneral public comment, or to speak for or again	nst a proposal on the agend	a? () For proposal () Against proposal
Name:	Jedvo Barrera		() General comments
Business or Organization	Affiliation:		
Address:			
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU	ARE A PAID SPEAKER AND PROVIDE CL	IENT INFORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 2-17-16		HE CITY COUNCIL'S RULES OF ECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before t		f City Agency, Department, Committee of	or Council
Do you wish to provide	general public com	ment, or to speak for or against a propo	sal on the agenda? () For proposal
Name:	Ignac	To Nunez	() Against proposal () General comments
Address:Str	and the same of th	City	State Zip
		Representing:	200
CHECK HERE IF YO	U ARE A PAID SE	PEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:			Phone #:
Client Address:Str	reet	City	State Zip

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Date 2-17-16	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 M	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general pu	ublic comment, or to speak for or against a prop	osal on the agenda? () For proposal () Against proposal () General commer	
Business or Organization Affiliation	n:		
Address:Street	City	State Zip	
Business phone:		State Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	

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Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
2/17/16	DECORUM WILL BE ENFORCED.	15-1543
I wish to speak before the EN	Name of City Agency, Department, Committee	
Do you wish to provide general p	public comment, or to speak for or against a prop	
Name: DAVID	GARDEN	() Against proposal () General comments
Business or Organization Affiliati	on: CRENKIAW COMMUNI	TY GARDON
Address: 1423 Street	CREN SHAW BLUD LI	A 90019 State Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 2/17/(6	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 24	E Committee Name of City Agency, Department, Committee	or Council	
Do you wish to provide general p Name: <u>Johanna Dyer</u>	ublic comment, or to speak for or against a prop		? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: NRDC		
Address: 1314 2nd Street	treet Santa Monica	CA State	90034 Zip
Business phone: 310 - 434 - 2	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File N	No., Agenda Item, or Case No.
2/17/16	DECORUM WILL BE ENFORCED.	15-1543	3 Hen#/
I wish to speak before the	Name of City Agency, Department, Committee of	Committee	
	Name of City Agency, Department, Committee of	r Council	
Do you wish to provide general p	oublic comment, or to speak for or against a propo	sal on the agend	a? () For proposal () Against proposal (✓) General comments
Business or Organization Affiliation	on: Collaborative for Urbon Agra	ecology	
Address: 308 E 9+	on: Collaborative for Urbon Agra h St Los Angeles	State	90015
Business phone:		Otale	ZIP
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	Low:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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I wish to speak before the	TY COUNCIL'S RULES OF RUM WILL BE ENFORCED. Agency, Department, Committee of	
Name of Gity	Agency, Department, Committee C	Council
Do you wish to provide general public comment,	or to speak for or against a propo	sal on the agenda? For proposal
Name: Graciela Ge	yer	() Against proposal () General comments
Business or Organization Affiliation:	ta Club	
Address: 354 Shults	St. Apt 1 U	, CA, 90042
Business phone: 323-68/-50Rep	resenting: Siewa	State Zip
Business priorie.	Toodhang.	
CHECK HERE IF YOU ARE A PAID SPEAK	ER AND PROVIDE CLIENT INF	ORMATION BELOW:
		The state of the s
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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Date 1/17/2016	THE CITY COUNCIL'S DECORUM WILL BE E Theray + = hviron	NFORCED.	Council File No., Agr	enda Item, or Case No.
I wish to speak before the	// /		mail Jee	
	Name of City Agency, Departn	nent, Committee of	r Council	
Do you wish to provide general Name: Kent Min Business or Organization Affiliat		or against a propos	sal on the agenda? (For proposal) Against proposal) General comments
1/1	ion.	1	a carrie	
Address: 13214 //.	agnolia DIVA	Therman (Dales, CA	91423
Street Business phone: 818 497	City Representing:		State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROV	DE CLIENT INFO	ORMATION BELOW:	
Client Name:			Phon	e #:
Client Address:				
Street	City		State	Zip