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Date 7/2///	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No.
3/4/16	DECORUM WILL BE ENFORCED.	16-0069
I wish to speak before the	City Council	#10
	Name of City Agency, Department, Commit	tee or Council
Do you wish to provide gene	ral public comment, or to speak for or against a p	proposal on the agenda? () For proposal
Name: WAUT	MªNEILL	() Against proposal () General comments
	iliation: MENGILL LAW DEFICE	65
Address: 280 A	HEMETED PRODING	CA 1600Z
	2-9992 Representing: ECK	
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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3 · 2 · 1 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	Name of City Agency, Department, Committee o	r Council	
Do you wish to provide general pub	lic comment, or to speak for or against a propos	sal on the agenda	? () For proposal
Name: AUBERT	TO TREVINO		(X) Against proposal (X) General comments
Business or Organization Affiliation:	AAGLA		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
	AID SPEAKER AND PROVIDE CLIENT INFO		OW: Phone #:
Client Address:			
Street	City	State	Zip

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Date 3 2 20/6	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 po	ublic comment, or to speak for or against a propo	osal on the agenda? () For proposal
Name: 5 6 ()	<u> </u>	() Against proposal
Business or Organization Affiliatio	n:	
Address: Street	472 UEFL	CGF 9(607) State Zip
Business phone:	Representing:	
	PAID SPEAKER AND PROVIDE CLIENT INF	
Client Name:		Phone #:
Client Address: Street	TH ROILE)	t Wood 9 607

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		1	
Date	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
3-2-16	DECORUM WILL BE ENFORCED.	-	To 10
I wish to speak before the	City Correct		
	Name of City Agency, Department, Committee or	Council	
	Ruser 6072aloz		
Name:	Ruger Our Zalo C		() General comments
Business or Organization Affilia	ation: LA Area Cha	amber od	- Conuce
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELC	W:
		_	
Client Name:		Р	hone #:
Client Address:			
Street	City	State	Zip

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Date 3/2/16 I wish to speak before the			Agenda Item, or Case No.
	Name of City Agency, Department, Committee	or Council	
Name: PA+		oosal on the agenda?	For proposal Against proposal General comments
Business or Organization Affi	iliation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU AR	E A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW	<i>l</i> :
Client Name:		Pho	one #:
Client Address:Street	Cit.	Chata	7:
Street	City	State	Zip

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

			10
Date 3/1/10	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 of	or Council	
Do you wish to provide general pu	blic comment, or to speak for or against a propo	sal on the agenda?	
Name: Graerele	Gever	() Against proposal) General comments
Business or Organization Affiliation	Siterna Club		90013
Address: 714 W	Olympic Stell	State State	Zip
Business phone: 323-68	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW	:
Client Name:		Pho	ne #:
Client Address:		01-1-	
Street	City	State	Zip

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Date 3/2/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	No., 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 p	public comment, or to speak for or against a propo	osal on the agend	a? (V) For proposal () Against proposal () General comments
Business or Organization Affiliati	on: Natural Resources Defense Courset Santa Monka City	nc.1	
Address: 1314 2nd Street	eet Santa Monka	<u>C</u> A State	9040) Zip
	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BEL	LOW:
Client Name:			Phone #:
Client Address:Street			
Street	City	State	Zip

Please see reverse of card for important information and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and submit this entire card to the prociding officer as a feeting and a feeting and

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Date 3 2 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 16-0865 Fem 410
I wish to speak before the	Name of City Agency, Department, Committee	1
Do you wish to provide general p	public comment, or to speak for or against a propo	osal on the agenda 2 () For proposal
Name: Theresa	Martinez	() Against proposal () General comments
Business or Organization Affiliation	on: Los Angeles Latino Chami	ber of Gmmerce
Address: 634 5. 5pr	on: Los Angeles Latino Chamering 54 #600 Cos Angeles	s A 90012
Business phone: 2/3-347-8	Representing: LACC	State Zip
	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:
Client Name:		Phone #:
Client Address:		
Street	City	State Zip

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3-2.16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCE		o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Con	nmittee or Council	
	bublic comment, or to speak for or against	t a proposal on the agenda	? (K) For proposal () Against proposal
Name: Ging Good	ahill Kosen		() General comments
Business or Organization Affiliation	on: Solar City		
Address:			
Business phone: 213 447	8583 Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIE	ENT INFORMATION BEL	ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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3·2·16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	H	genda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm	ittee or Council	
Do you wish to provide genera	al public comment, or to speak for or against a	proposal on the agenda?	For proposal
Name: John	HOWYAND	() General comments
Business or Organization Affili	ation: CONTRAL CITY 1	7880C.	
	WILSHIRE #200 City		Zip
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	T INFORMATION BELOW	:
Client Name:		Pho	ne #:
Client Address:			
Street	City	State	Zip