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Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
teb 26,201a	DECORUM WILL BE ENFORCED.		1 16-0596 S-
I wish to speak before the	Name of City Agency, Department, Committee	COMMITE. or Council	e
Do you wish to provide general	public comment, or to speak for or against a prop	osal on the agenda	? (For proposal
Name: (L(\)(\)			() Against proposal () General comments -
Business or Organization Affiliati	ion: Invest In Youth Coal	ition-	
Address: 777 N Suffacet	St Apt 203 LOS Angeles	State	90033 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		F	Phone #:
Client Address:Street	City	Stata	Zin
Street	City	State	Zip

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Date 2/26/19	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	CONOMIC DEVELOPMENT COMM Name of City Agency, Department, Committee		
Name: Selina Valde	public comment, or to speak for or against a propo 2 ion: INVEL IN VAFA (odlition)		a? (X) For proposal () Against proposal () General comments
Address:Street	City	State	Zip
Business phone:		Otalo	-ip
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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Date 2. 26. 2019	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before theE	Name of City Agency, Department, Committee or		
Do you wish to provide general	public comment, or to speak for or against a proposa	al on the agenda	? (For proposal
Name: Carrandra Ca			() Against proposal General comments
Business or Organization Affiliati	ion: Invest in Youth Coalition		
Address: 1350 San	Pablo St. Los Angeles	CA State	90033 _{Zip}
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:Street	City	State	Zip

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Date 2/2(e)19	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 or	
Do you wish to provide general p	public comment, or to speak for or against a proposa	al on the agenda? (For proposal
Name: Maria Lou		() Against proposal () General comments
Business or Organization Affiliati	n Pablo St. Los Angeles	
	-8367 Representing:	State Zip
	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		Agenda Inem, or Case No.
I wish to speak before the			
	Name of City Agency, Department, Comr	nittee or Council	
Do you wish to provide gene	eral public comment, of to speak for or against a	proposal on the agenda?	() Against proposal
Name:	# 1/////		() General comments
Business or Organization Af	ffiliation.		
Address:Street			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND PROVIDE CLIEN	T INFORMATION BELO	W:
Client Name:		PI	none #:
Client Address:			
Street	City	State	Zip

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THE CITY COUNCIL'S BULES OF

Council File No., Agenda Item, or Case No.

Date

1010	DECORUM WILL BE ENFORCED.	+
I wish to speak before the		
	Name of City Agency, Department, Committee	e or Council
Do you wish to provide general put	olic comment, or to speak for or against a pro	() Against proposal
Name:	1-1-1211	General comments
Business or Organization Affiliation		1/ \
Address:Street	City	State Zip
Business phone:	/ /	
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	Cit.	Chata
Street	City	State Zip