Date: 10/25/2017

I wish to speak before the Council

Council File No., Agenda Item, or Case

Item NO. (18) - 16-0647

Client Address.	Street	City	State	Zip
Client Address:				
Client Name:			Phone#:	
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND PROVIDE (CLIENT INFORMATION BELOW:		
Business Phone:	Represe	enting:		
	Street	City	State	Zip
Address:				
Business or Organization	Affiliation: Disability Rights Cali	fornia		
Name: Natasha Rey	/es			
Do you wish to provide ge	neral public comment, or to speak for o	r against a proposal on the agenda?	General Comment	

NOTE: INFORMATION PROVIDED WILL BE MADE PART OF THE PUBLIC RECORD

Date: 10/25/2017

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Do you wish to provide general pub	ic comment, or to speak for or	against a proposal on the agenda?	General Comment	
Name: Puppet Or Wayne				
Business or Organization Affiliation:				
Address:				
S	Street	City	State	Zip
Business Phone:	Represe	enting:		
CHECK HERE IF YOU ARE A PAID) SPEAKER AND PROVIDE C	LIENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				
	Street	City	State	Zip

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State

Item NO. (18) - 16-0647

Zip

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Do you wish to provide ge	neral public comment, or to speak for	or against a proposal on the agenda?	General Comment	
Name: Eric Preven				
Business or Organization	Affiliation:			
Address:				
Addiess	Street	City	State	Zip
Business Phone:	Repre	senting:		
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION BELOW:		
Client Name:			Phone#:	
Client Address:				

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City

Street

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Street

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Item NO. (18) - 16-0647

Zip

Do you wish to provide general public com	ment, or to speak for or against a pro	pposal on the agenda?	General Comment	
Name: Fuck Herman				_
Business or Organization Affiliation:				
Address:				
Street		City	State	Zip
Business Phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEA	KER AND PROVIDE CLIENT INFOI	RMATION BELOW:		
Client Name:			Phone#:	
Client Address:				

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City