NOTE: THIS YOU ARE NO EXCEPT TO T	IS A PUBLIC DOCUMENT SUBJECT TO POSTI OT REQUIRED TO PROVIDE PERSONAL INFORI THE EXTENT NECESSARY FOR THE PRESIDING	MATION IN ORDER TO SPEAK,
Date 11/1/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 9 (815D Support
I wish to speak before the	Name of City Agency, Department, Commit	ttee or Council
Do you wish to provide general Name: Nicole S	public comment, or to speak for or against a p	proposal on the agenda? Y For proposal () Against proposal () General comments
Business or Organization Affiliati	ion: Hollywood Chambe	er of Commerce
Address: 7010 H	Pllyword Blud. LA 1-8311 Representing: Member	A CA 90028 State Zip
Business phone: 333-864	1-83/1 Representing:	v Ship
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

YOU ARE NOT REQ	UBLIC DOCUMENT SUBJECT TO POSTING DUIRED TO PROVIDE PERSONAL INFORMAT TENT NECESSARY FOR THE PRESIDING OF	TION IN ORDER TO SPEA	AK,
Date 1 - 01-16 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. City Council	410	enda Item, or Case No.
	ne of City Agency, Department, Committee comment, or to speak for or against a prop) For proposal
Name: JOWard	ANT Seed) Against proposal) General comments
Business or Organization Affiliation: Address:	XATA2 LOSA	Flat CA-	Zip Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phon	e #:
Client Address:	City	State	Zip
Please see reverse of card for impo	ortant information and submit this entire ca	rd to the presiding offic	or or chairperson

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

Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., 7 Jenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	a or Council
Do you wish to provide general p Name: Business or Organization Affiliati	oublic comment, or to speak for or against a pr	
Address:Street	City	State Zip
Business phone:	Representing:	
HECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip
Please see reverse of card for	or important information and submit this entire	card to the presiding officer or chairperson.

YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJECT TO POSTING O OT REQUIRED TO PROVIDE PERSONAL INFORMAT THE EXTENT NECESSARY FOR THE PRESIDING OF	ION IN ORDER TO SP	PEAK,
Date .	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	CHy Council Name of City Agency, Department, Committee	or Council	
Do you wish to provide general Name: <u>Tracy Patton</u>	public comment, or to speak for or against a propo		 (×) For proposal () Against proposal () General comments
Business or Organization Affiliat	ion:		
Address: 14/11 1 4	hyworth Ave West Hollywoo	+U	
	Representing:	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	<i>N</i> :
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip
Please see reverse of card f	for important information and submit this entire ca	rd to the presiding of	ficer or chairperson

YOU ARE NOT	S A PUBLIC DOCUMENT S REQUIRED TO PROVIDE I E EXTENT NECESSARY FO	PERSONAL INFO	RMATION IN	ORDER TO	SPEAK,
Date 11/1/2016	THE CITY COUNC DECORUM WILL			Council File	No., Agenda Item, or Case No.
I wish to speak before the $_L$ \land	City Council Name of City Agency, De	epartment, Comr	nittee or Co	uncil	
Do you wish to provide general pu Name: DAMIAN F					() Against proposal
Business or Organization Affiliation	n:				
Address: 16600 SAN FERM Street	JANDO MISSION BLVD #60	GRANADA City	HILLS	C A State	91344 Zip
Business phone:					
CHECK HERE IF YOU ARE A	PAID SPEAKER AND P	ROVIDE CLIEN	IT INFORM	ATION BE	LOW:
Client Name:					Phone #:
Client Address:Street		City		State	Zip
Please see reverse of card for	important information and	d submit this ent	tire card to t	he presiding	g officer or chairperson.

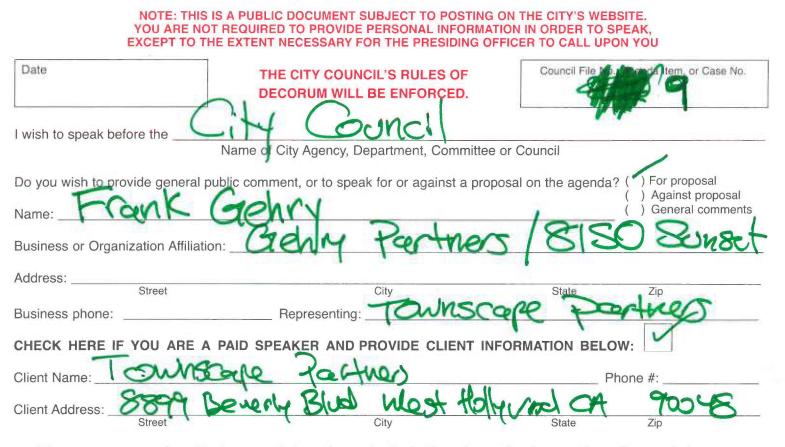
YOU ARE NO	S IS A PUBLIC DOCUMENT SUBJECT T OT REQUIRED TO PROVIDE PERSONA THE EXTENT NECESSARY FOR THE PF	L INFORMATION IN ORDE	ER TO SPEAK,	1
Date (1/1/6	THE CITY COUNCIL'S RUL DECORUM WILL BE ENFO			a Item, or Case No.
I wish to speak before theC	Name of City Agency, Department,	Committee or Council	1	
Do you wish to provide general Name: $(L = 1 T H)$	public comment, or to speak for or ag	ainst a proposal on the a	agenda?	or proposal Igainst proposal General comments
Business or Organization Affiliati		IA (A	Annha
Address:Street	CROFT ASE City	Stat	ie Zi	p
Business phone:	Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE	CLIENT INFORMATION	BELOW:	
Client Name:			Phone #	
Client Address:Street	City	State	e Zi	p
Please see reverse of card f	for important information and submit t	his entire card to the pre	sidina officer a	r chairperson.

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTI DT REQUIRED TO PROVIDE PERSONAL INFOR HE EXTENT NECESSARY FOR THE PRESIDING	MATION IN ORDER TO SPEAK,
Date 11.1.2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Commit	ttee or Council
Do you wish to provide general p	SLOT Find	oroposal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliati Address: <u>523</u> <u>W</u>	on: <u>US / Marcs UN &</u> <u>UTN SWeet/376 LA</u> City.	State Zip
Business phone: $2/3 \cdot 430$	4202 Representing: 1A CONS	CNONY
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW: Phone #:
Client Address:Street	City	State Zip

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POS OT REQUIRED TO PROVIDE PERSONAL INFO HE EXTENT NECESSARY FOR THE PRESIDI	RMATION IN ORDER TO	SPEAK,
Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		o., Agenda Item, or Case No.
I wish to speak before the Cit	Name of City Agency, Department, Com	mittee or Council	
Do you wish to provide general Name: <u> </u>	public comment, or to speak for or against MULERO	a proposal on the agenda	a? (<) For proposal () Against proposal () General comments
Business or Organization Affiliation Affiliation Address: 1022 N.	VISTAST. #7 1	NEI+O CA State	90046 zip
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIEN		ow:
Client Name:			Phone #:
Client Address:	City	State	Zip
Please see reverse of card f	or important information and submit this en	tire card to the presiding	officer or chairperson.

YOU ARE NOT	S A PUBLIC DOCUMENT SUBJECT TO POSTING O REQUIRED TO PROVIDE PERSONAL INFORMATION E EXTENT NECESSARY FOR THE PRESIDING OFF	ON IN ORDER TO S	PEAK,
Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No. 9/10	., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee c	or Council	
Do you wish to provide general pu Name: <u>Feliz Rap</u> l	ublic comment, or to speak for or against a propo		 ? (➤) For proposal () Against proposal () General comments
Business or Organization Affiliation			
Address: 12-85 Sime	eetzer West Hollywood	State	Zip
Business phone:	Representing:		- P
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELC	DW:
Client Address:	0:44	Chaire	7:-
Street Please see reverse of card for	City r important information and submit this entire card	State d to the presiding c	Zip officer or chairperson.

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING T REQUIRED TO PROVIDE PERSONAL INFORMA HE EXTENT NECESSARY FOR THE PRESIDING C	ATION IN ORDER TO SP	EAK,
Date	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	e or Council	
Do you wish to provide general p	public comment, or to speak for or against a pro	posal on the agenda?	(For proposal
Name: Edgar	chalatten on: Mayer Brown		Against proposalGeneral comments
Business or Organization Affiliati	on: Mayer Brown		
Address:Street	City	State	Zip
Business phone:	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT IN		
Client Name:	scape partners /816	Photo	one #:
Client Address: Street	City	State	Zip



YOU ARE NOT REQUIR	LIC DOCUMENT SUBJECT TO POSTING O RED TO PROVIDE PERSONAL INFORMATION IT NECESSARY FOR THE PRESIDING OFF	ON IN ORDER TO	SPEAK,
	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N 16 - 1011	lo., Agenda Item, or Case No. 9
I wish to speak before the City Con	f City Agency, Department, Committee o	r Council	
Do you wish to provide general public com Name: Bevery Parmer Business or Organization Affiliation:		sal on the agend	a? () For proposal
			90024
Address: <u>10940</u> Wilshire Street Business phone:	Representing: Fix the City	State	Zip
CHECK HERE IF YOU ARE A PAID S	PEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	.ow: 🔽
Client Name: Fix the City			Phone #:
Client Address:Street	City	State	Zip

YOU ARE NOT	S A PUBLIC DOCUMENT SUBJECT TO POSTING OI REQUIRED TO PROVIDE PERSONAL INFORMATIC E EXTENT NECESSARY FOR THE PRESIDING OFFI	N IN ORDER TO SPEAK,
	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $(6 - 10) (9)$
I wish to speak before the	Name of City Agency, Department, Committee or	Council
Do you wish to provide general pu Name:	ublic comment, or to speak for or against a propos	al on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation	n: Laurel Canyon Associ	ation
Address: <u>8200</u> Wild Business phone: 30-782	-1760 Representing: Laurel (2	ly Hills, CA 90211 State Zip Zimpon tosucation
	PAID SPEAKER AND PROVIDE CLIENT INFO	l
Client Name:		Phone #:
Client Address:Street	City	State Zip

YOU ARE NO	S A PUBLIC DOCUMENT SUBJECT TO POSTING OF REQUIRED TO PROVIDE PERSONAL INFORMAT E EXTENT NECESSARY FOR THE PRESIDING OF	ION IN ORDER TO S	PEAK,
Date	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 Council	
Do you wish to provide general p	ublic comment, or to speak for or against a prop	osal on the agenda'	? () For proposal () Against proposal
Name: O CSMin	e youssefzede	h	() General comments
Business or Organization Affiliatio			and
Address:Street	Los Angeles		TODA
Street Business phone:	City City	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:	City	State	Zip
	r important information and submit this entire ca		

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							
Date ////////////////////////////////////	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.					
I wish to speak before the City Council							
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 Name: STEMEN STEMEN LUFTMAN Business or Organization Affiliation: SPLEAMS of UMMAN							
Address: 1212 5	ORLANDO LA	State Zip					
	Representing: <u>FRIENDS</u> of	Lyttan Shuthan					
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:							
Client Name:		Phone #:					
Client Address:Street	City	State Zip					

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING O T REQUIRED TO PROVIDE PERSONAL INFORMATI HE EXTENT NECESSARY FOR THE PRESIDING OFI	ION IN ORDER TO SPEAK,	
Date 10801-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $16 - 1011$	D.
I wish to speak before the	Name of City Agency, Department, Committee of	or Council	
Do you wish to provide general p Name: ROLY BAC	public comment, or to speak for or against a propo	(X) Against proposa	
Business or Organization Affiliation	on:		
Address: 1416 haven	horst Dr = 16 Weho C	XA 90046	
Business phone 310 50 2-1	NUX IT DF #1E Wehd C City 8797 Representing:	State Zip	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone #:	
Client Address:Street	City	State Zip	
Please see reverse of card for	or important information and submit this entire car	d to the presiding officer or chairperson.	

YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TREQUIRED TO PROVIDE PERSO HE EXTENT NECESSARY FOR THE	NAL INFORMATION IN OF	RDER TO SPEA	NK,		
Date 11 - 1 - 16	THE CITY COUNCIL'S R DECORUM WILL BE ENF	FORCED.	uncil File No., Age	enda Item, or Case No.		
I wish to speak before the	Name of City Agency, Departme		il			
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? () For proposal Against proposal () General comments						
Business or Organization Affiliation:						
Address: <u>3/570</u>	9209 Representing:	LOSA	WELB State	90068 Zip		
Business phone: 323 463	9409 Representing:			[]		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:						
Client Name:			Phon	e #:		
Client Address: Street	City	Ş	State	Zip		