

# CITY OF LOS ANGELES SPEAKER CARD

Date: 11/08/2016

Council File No., Agenda Item, or Case  
Item NO. (11) - 16-1048

I wish to speak before the Council

Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? **General Comment**

Name: george abrahams

Business or Organization Affiliation: \_\_\_\_\_

Address: 3150 durand drive los angeles ca 90068  
Street City State Zip

Business Phone: 323 463 9209

Representing: \_\_\_\_\_

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

Client Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Client Address: \_\_\_\_\_  
Street City State Zip

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

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Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? **Against Proposal**

Name: jen

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: Donna G.

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: nelson pichardo

Business or Organization Affiliation: CA Assembly D39

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? **Against Proposal**

Name: sylvie shane

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: sylvie shane

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

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Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: brittany chenelle

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: bill pryzlucky

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: chris cuellar

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: steven bowers

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: mark simon

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_ **90027**  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

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Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? **General Comment**

Name: elisa paster

Business or Organization Affiliation: glaser weil

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:  X

Client Name: ub valley village llc Phone#: \_\_\_\_\_

Client Address: \_\_\_\_\_  
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Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? **For Proposal**

Name: bill przylucki

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: anne

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: walt senterfitt

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: Miki Jackson

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

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Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: debor roventini

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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Name: carol cetrone

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

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Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: eric preven

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

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Business Phone: \_\_\_\_\_

Representing: \_\_\_\_\_

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Name: jennifer

Business or Organization Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_  
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Business Phone: \_\_\_\_\_ Representing: \_\_\_\_\_

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