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Date 6 - 26 - 16	THE CITY COUNCIL'S RUI DECORUM WILL BE ENFO		Council File N	No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department	Committee or Co	ouncil (6	6-1274
Do you wish to provide general Name: Pay Uvan, He	public comment, or to speak for or a	ainst a proposal o	on the agend	a? () For proposal
Business or Organization Affiliat	ion: 360 inc eside dr. Toluce	a Lake	Ca	91602
Business phone: 818 505	Representing: A PAID SPEAKER AND PROVIDE			
Client Name:				Phone #:
Client Address:Street	City		State	Zip

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Date 6 26 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee	Commit	Agenda Item, or Case No.
	public comment, or to speak for or against a propo	osal on the agenda	? Lifer proposal
Name: CARLOS	DELOTORIS		Against proposal General comments
Business or Organization Affiliati	on: CORMERSTONE R	BSEARC	.+1
Address:			14
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:			
Street	City	State	Zip

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Date 10/26/71/6		UNCIL'S RULES OF ILL BE ENFORCED.	/	., Agenda Item, or Case No.
wish to speak before the	•	, Department, Committee		6-1274
Do you wish to provide general Name: JAVLER M6N le		peak for or against a propo	osal on the agenda	? () For proposal () Against proposal () General comments
Business or Organization Affilia	ion: VCBA/Del	-TA 9		
Address:Street		City	State	Zip
Business phone:	Representi	ng:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AN	ID PROVIDE CLIENT INF	ORMATION BELO	ow:
Client Name:			P	hone #:
Client Address:				
Street		City	State	Zip

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Date 16/86	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council Fil	e No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or C	,	= 16-1279
Do you wish to provide general p	public comment, or to speak for or against a proposal	on the age	nda? () For proposal
Name: 50€ 510	VERSTEIN		() Against proposal () General comments
Business or Organization Affiliation			
Address: 21627 OE	CITY CITY	State	7:0
Business phone:	City Representing: 5T/A/SA	LOA	CAREBINELS
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION B	ELOW:
Client Name:			_ Phone #:
Client Address:Street	City	State	Zip

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Date /0/26/2	o/6	THE CITY COUNCIL'S R DECORUM WILL BE EN THEM Name of City Agency, Department	MULT	1	0., Agenda Item, or Case No.
Do you wish to provide	de general pu	blic comment, or to speak for or			a? (1) For proposal
Name: 46	1	Aldaz			() Against proposal () General comments
Business or Organiza	ation Affiliation	UCBA			
Address:					
	Street	City		State	Zip
Business phone:		Representing:			
		PAID SPEAKER AND PROVID			OW: Phone #:
Client Address:					
	Street	City		State	Zip

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Date 10/26/2016 I wish to speak before the	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Name of City Agency, Department, Committee	2 1	Agenda Item, or Case No.
Do you wish to provide general p	oublic comment, or to speak for or against a pro-	roposal on the agenda?	() For proposal () Against proposal () General comments
		UCBA	() General comments
Address: 14080 Ve	on: The Higher Path / cutura Blud Sherman City	Oaks CA	94(23 Zip
Business phone: 58.385	S./ZZY Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	w:
Client Name:		PI	none #:
Client Address:Street	City	State	Zip

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Date 16 26 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the	Hules committee		16-1274
	Name of City Agency, Department, Committee	or Council	
Do you wish to provide general pul	blic comment, or to speak for or against a prop	osal on the agenda	For proposal () Against proposal
Name: (59 Sela	<u> </u>		() General comments
	: UCBA Trade Asso		
Address: 23619 Cel	letases		
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELO	w:
Client Name:		P	hone #:
Client Address:			
Street	City	State	Zip

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Date 16/26/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the Ro	Name of City Agency, Department, Committee of		6-1274
	blic comment, or to speak for or against a propo RMSTRONG :Americans For S		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A I	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELO	w:
Client Name:		Ph	none #:
Client Address:Street	City	State	Zip

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Date 10/26/16	Rues	Agenda Item	
I wish to speak before the	BOARD OF PUBLIC WOR		6-1274
	Name of City Agency, Department C	ommittee or Council	
Do you wish to provide general p	public comment, or to speak for or again	nst a proposal on the agenda?	() For proposal() Against proposal
Name:AY	MOON	**	15 200 1
Business or Organization Affiliation	DALTAR GT	ORA	
Address: 23636	BALTAR GT	WEST HILL	5 CA
Business phone: 818-451-	-5 ²²⁷ Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CL	LIENT INFORMATION BELOV	V:
Client Name:		Pho	one #:
Client Address:			
Street	City	State	Zip

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Date 10 76 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	<u>.</u>	o., Agenda Item, or Case No.
I wish to speak before the	Rules Committee	mittee or Council	16-1274
Name: Ruben Ha	public comment, or to speak for or against		? () For proposal () Against proposal (<) General comments
Address:	0.1	01-4-	7
Street Business phone:	City Representing:	State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIE	NT INFORMATION BELO	ow:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF	Council File No	o., Agenda Item, or Case No.
10/26/16	DECORUM WILL BE ENFORCED.	/	/
I wish to speak before the	ules commote	/	6-12-74
	Name of City Agency, Department, Committee of	r Council	
Name: 10 Mey G		sal on the agenda	() For proposal () Against proposal (General comments
Business or Organization Affiliation	: LA cannabis +	ask for	ole
	Noft AVe LA City	State	90048
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BEL	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip
Street	City	State	حال

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Date 10-26-16 I wish to speak before the	DECORUM W	UNCIL'S RULES ILL BE ENFORC (, Department, Co	ED.		genda Item, o	
Do you wish to provide general p	DIN				() Against	osal proposal comments
Business or Organization Affiliation Address: Business phone: Street CCC-976	on: TEAMS PORME (TENS	JC 9.	2 Comont	CA	9170
Business phone: Street	/-//Z \Z_Representi	City	agnat	State	Zip	
CHECK HERE IF YOU ARE A						
Client Name:				Pho	one #:	
Client Address:		City		State	Zip	

EPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF I wish to speak before the 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 Against proposal General comments Business or Organization Affiliation: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address: Street City State Zip

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Date $10/2b/2016$ I wish to speak before the/	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Roles Committee of Name of City Agency, Department, Committee of City Agency, C	16	., Agenda Item, or Case No.
Do you wish to provide general p	public comment, or to speak for or against a propo	sal on the agenda	? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Leaf of Life Wellness		
Address: S250 CAA	6-560 Representing:		91606 Zip
Business phone: 2619 76	P >60 Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELO	OW:
Client Name:		F	Phone #:
Client Address:Street	City	State	Zip

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Date 10 24 20 K I wish to speak before the Ru	DECORUM	COUNCIL'S RULES OF WILL BE ENFORCED.	16-	o., Agenda Item, or Case No.
Do you wish to provide general				(? () For proposal () Against proposal () General comments
Name: (A+ Packer				- General comments
Business or Organization Affiliat	tion: OPA			
Address: 3470 w:)s	He Brod	CVJ	CB	90010
Street		City	State	Zip
Business phone:	Represe	nting:		
CHECK HERE IF YOU ARE				
Client Name:			F	Phone #:
Client Address:		***		
Street		City	State	Zip

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#1

NEOL	SOAM FOR THE FRESIDING OFFICE	TO DALL OF ON TOO.	1
Date /8/26/2016 I wish to speak before the	A VLES COMMITTE		
Name: MART7	ublic comment, or to speak for or against	a proposal on the agenda? ((() For proposal) Against proposal) General comments
Address: 3878 BLC) Street Business phone: 323-931-990	DR. L.A.	State	Joxo8
	PAID SPEAKER AND PROVIDE CLIE		:
Client Address:Street	City	State	Zip

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	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. WESSON TO ON CITY of City Agency, Department, Committee or	(BNNC)	Agenda Item, or Case No.
Do you wish to provide general public of	comment, or to speak for or against a proposa	al on the agenda?	
Name: JANA CAL	tw		() Against proposal () General comments
Business or Organization Affiliation:	PAIN FREE GOLIETY	OF CAGA	ORNT/
Address: 4906 MELGORE	Ave Los Angeles	CA	90029
Address: 4906 Mayor Street Business phone: 310-670-737	2 Representing: LOSO LTC	ENSES	Zip
CHECK HERE IF YOU ARE A PAID		RMATION BELO	w:
Client Name:		Pr	one #:
Client Address:Street	City	State	Zip

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Date		Agenda I	tem
10/26	Liles		
I wish to speak before the	BOARD OF PUBLIC	S WORKS	16-1274
	Name of City Agency, Departr	nent, Committee or Council	
Do you wish to provide genera	al public comment, or to speak for	or against a proposal on the a	
D - 2 Par 1	VERENTO		Against proposal
Name: 6045 64	VECCATIO		() General comments
Business or Organization Affili	ation: Southern	SALITORNIA	Contition
Address: Camba	DR BW H	ILLS Ca	90210 e Zip
Business phone: 243-7	ארל איני Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROV	IDE CLIENT INFORMATION	BELOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	e Zip