Date 1/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. I - G
I wish to speak before the	DHOC Sungar Affai Name of City Agency, Department, Committee or	Council
Do you wish to provide general p	public comment, or to speak for or against a proposi-	
Name: Martha I	Zquierdo	() Against proposal General comments
Business or Organization Affiliat	ion: Esperanza Immigrant	Rights Project
Address: 3258 Dun, Street	ion: <u>Esperanza Immigrant</u> robin Ane - <u>Dauney</u> City	CA CODUCA State Zip
Business phone: (213)251-	3536 Representing:	
	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip
Please see reverse of card f	or important information and submit this entire card	to the presiding officer or chairperson.

Date 1 25 17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before theA	Name of City Agency, Department, Committee	Affairs Co e or Council	mmittee
Do you wish to provide general	public comment, or to speak for or against a prop	oosal on the agenda?	
Name: MARIA FU	IRES		 Against proposal General comments
Publicate or Organization Affiliat	in Union del Banio + Ce	utral Alamer	la Neighborhood
Address: 156 W. Grage	Ane. Apt. 2 Los Angeles	S Goncil	
Business phone: (373)540	2 Ane. Apt. 2 Los Angeles City D-6908 Representing:	State	Zip
	A PAID SPEAKER AND PROVIDE CLIENT IN		V:
Client Name:		Ph	one #:
Client Address:	City	State	Zip
Please see reverse of card f	or important information and submit this entire ca	ard to the presiding of	ficer or chairperson.

CITY OF LOS ANGELES SPEAKER CARD	
Date THE CITY COUNCIL'S RULES OF Council File No., Agenda 1-6	a Item, or Case No.
I wish to speak before the AD HOC ON MMIGRANT AFFAIRS COMMITTEE 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
Nama: MARCOS FTCS 1112 ATT2	General comments
Business or Organization Affiliation: EASTSIDE RISING ASSEMBLY-CALLFORMARISING	COALITION
Address: 4736 HUNTINGTON DR SO LA, CA 90032	Zip
Business phone: 323 791-7012 Representing: 1ND/GENOUS PEOPLES	p
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:	
Client Name: Phone #	ł:
Client Address:City State Z	lip
Please see reverse of card for important information and submit this entire card to the presiding officer of	or chairperson.

Date 25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No. - 6
I wish to speak before the $\underline{t}_{\mathcal{M}}$	ame of City Agency, Department, Committee o	mmiffree r Council	
Do you wish to provide general publi Name:	ic comment, or to speak for or against a propos \mathcal{Mez}_{-}	al on the agenda	? () For proposal () Against proposal (V) General comments
Business or Organization Affiliation:	Union Del Barrin	Ó	-
Address: 1016 E. J.Y.M. Street	Los Angeles	State	9-01011 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELC	ow:
Client Name:		F	Phone #:
Client Address:	City	State	Zip
Please see reverse of card for in	nportant information and submit this entire card	to the presiding	officer or chairperson.

Date 125717 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the LA 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 proper	osal on the agenda? (For proposal
Name: MARTHA OFELLA JIMENEZ	() Against proposal () General comments
Business or Organization Affiliation: CITY TERRACE COMMITTEE	FOR PEACE & SOCIAL JUSTICE
Address: 1134 H. HAZARD AVE LA	CA 90063 State Zip
Business phone 323 394-244 Z Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:	Phone #:
Client Address: City	State Zip
Please see reverse of card for important information and submit this entire ca	rd to the presiding officer or chairperson.

Date 1/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda	a Item, or Case No.
I wish to speak before the ADH_{0}	Name of City Agency, Department, Committee of	Committee	
Do you wish to provide general pu	blic comment, or to speak for or against a propo		
Name: Williams		(1)	Against proposal General comments
Business or Organization Affiliation	n: MEChA de Maya F	Ingelov	
Address: 5316 Lar	them st Log Angely	State 7	Zip
Business phone: 323239	7677 Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:	
Client Name:		Phone #	#:
Client Address:	City	State Z	Zip
Please see reverse of card for	important information and submit this entire card	d to the presiding officer (or chairperson.

Date 01 25 17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	b., Agenda Item, or Case No. - 6
I wish to speak before the	AD HOC ON Immigrant Affairs (Name of City Agency, Department, Committee or	ommittee Council	
Do you wish to provide general p	oublic comment, or to speak for or against a proposa	I on the agenda	
Name: ROSA Tova	A.C.		() Against proposal ()() General comments
Business or Organization Affiliati Address:	ion: Esperanza Inmigran James M. Wood Blad City 3538 Representing: the Undocument	t Righ Los Ave	eles (A 9001:
Business phone 213)251 -	3538 Representing: the Undocumer	ted im	migrant commu
	A PAID SPEAKER AND PROVIDE CLIENT INFOR		a second second
Client Name:		F	Phone #:
Client Address:			
Street	City	State	Zip
Please see reverse of card for	or important information and submit this entire card t	to the presiding	officer or chairperson.

Date 1/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before theName	HOC ON Transferrant e of City Agency, Department, Committee or	Affirirs Committee
Do you wish to provide general public co	omment, or to speak for or against a propose	al on the agenda? (*) For proposal () Against proposal () General comments
Business or Organization Affiliation: Address: Spring	Immigrant Defenders	Law center
Business phone: 213-239-30	G Representing: <u>Undocum</u>	state Zip nt d ynth
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address: Street	City	State Zip

Date 112512017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	b., Agenda Item, or Case No.
I wish to speak before the	City Council AP HOC ON IM Name of City Agency, Department, Committee or	191910NT Council	Affair Committee
Do you wish to provide general	public comment, or to speak for or against a proposa	I on the agenda	 (V) For proposal () Against proposal
Name: Evelyn Cerle	ino-Nait		General comments
Business or Organization Affiliat	ion: Esperanza Iminigrant Rig	hts Project	<u>т</u> т
Address: 1530 James	M. Word has Angeles	CA	90015
Business phone: 213-251-	-3504 Representing: Unaccompanyand	hildnen, un	represented adults IN
	A PAID SPEAKER AND PROVIDE CLIENT INFOR		HUMROMOVA
Client Name:		F	Phone #:
Client Address:	City	State	Zip
Please see reverse of card f	for important information and submit this entire card t	the presiding	officer or chairperson.

Date 01/25 2017		JNCIL'S RULES OF LL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the $\underline{A}\underline{D}$	Name of City Agency,	IT <u>AFFAILS COMM</u> Department, Committe	HTCC ee or Council	
Do you wish to provide general	public comment, or to sp	eak for or against a pro	posal on the agen	
Name: Mauro Fern	andez			 Against proposal General comments
Business or Organization Affiliat	ion: ESPERANZA	IMMIGRANT RIGHT	IS PROJECT	
Address: 1530 AME	5 M WOOD BLVD	LOS ANGELES	CA	92016
Address: <u>1530</u> AME Street Business phone: (213) 251-35	SZZ Representir	ng: The undocumented	community and	the small grant community in gen
CHECK HERE IF YOU ARE				
Client Name:				_ Phone #:
Client Address:		City	State	Zip
Please see reverse of card t	or important information	and submit this entire of	card to the presidir	ng officer or chairperson.

Date 1/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., /	Agenda Item, or Case No.
I wish to speak before the Ad	Hoc on Immigrant Affai	rs Com	mittee
	Name of City Agency, Department, Committee or (
Name: Katherine (public comment, or to speak for or against a proposa $\frac{1}{2}$	I on the agenda?	 () For proposal () Against proposal () General comments
Business or Organization Affiliati	on: Immigrant Defenders L	aw Cent	ter
Address: 634 Spring	, St. LOS Angeles	CA State	90014 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOV	v:
Client Name:		Ph	one #:
Client Address:Street	City	State	Zip
Please see reverse of card for	or important information and submit this entire card to	o the presiding of	ficer or chairperson.

CITY OF LOS ANGELES SPEAKER CARD Date Council File No., Agenda Item, or Case No. THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. 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 ASON ESquivel Name: General comments Business or Organization Affiliation: Address: _______Street City State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address: Street City State Zip Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

CITY	OF LOS ANGELES SPEAKER	CARD	1-6
Date JAN 25,2017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No. Lec Cerutheeuts
I wish to speak before the Polo	Comment S of City Agency, Department, Committee or	Council	
Do you wish to provide general public co Name: <u>Willium Rodm</u> Business or Organization Affiliation: <u>CA</u> Address: <u>2728 CINCINNA</u> Street Business phone: <u>323-907-8700</u>	mment, or to speak for or against a propose <u>GUE Monriscul</u> <u>GUE Monriscul</u> <u>GUE Monriscul</u> <u>GUE Monriscul</u> <u>GUE Monriscul</u> <u>GUE Monriscul</u> <u>ST LUS Angeles</u> <u>City</u> <u>Representing: <u>Willimm Rodr</u> SPEAKER AND PROVIDE CLIENT INFO</u>	al on the agen Storp ly State Iquez Me	() Against proposal () General comments <u>Jendra Directer</u> <u>90033</u> Zip
Client Name:			Phone #:
Client Address: Street	City	State	Zip
Please see reverse of card for impor	tant information and submit this entire card	to the presidin	ng officer or chairperson.

Date 01/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 1 - 6
	MM · ON JMM · Affer Name of City Agency, Department, Committee	
Do you wish to provide general put	blic comment, or to speak for or against a propo	osal on the agenda? () For proposal
Name: MElody K	-lingentuss DACAS	Student () Against proposal
Business or Organization Affiliation	: SALEF/USC	
Address: 9819 Dav	rube Are. LA	CA 91313
Business phone:	Representing:	US C Zip
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
Please see reverse of card for	important information and submit this entire car	rd to the presiding officer or chairperson.

CITY OF LOS ANGELES SPEAKER CARD
Date THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED. Council File No., Agenda Item, or Case No. $1 - 6$
I wish to speak before the <u>Ad Hoc on Jmm; Frent Affairs Comm; Hee</u> 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: <u>Yenny Umuilla</u> General comments
Business or Organization Affiliation: Nove
Address: 2328 West-Blud Los Hugeles CA 920/6 Street State Zip
Business phone:NA Representing:A - The undocumented and immigrant
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:
Client Name: Phone #:
Client Address:
Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

Date 1725/17 THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	or Council
Do you wish to provide general public comment, or to speak for or against a propo Name: $MARK MASAOKA$	sal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation: ASIAN PACIFIC POLICY	+ PLANNING COUNCR
Address: 905 E. 8th Street UN	90021
Business or Organization Affiliation: ASIAN PACIFIC POLICY Address: 905 E. B B Street 1A Street City Business phone: 213-239-0300	State Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO	
Client Name:	Phone #:
Client Address: Street City	State Zip
Please see reverse of card for important information and submit this entire care	d to the presiding officer or chairperson.

.e	CITY OF LOS ANGELES SPEAKER	CARD	
Date / /7	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Mame of City Agency, Department, Committee or	Council	
Do you wish to provide general	ublic comment, or to speak for or against a proposa	al on the agenda?	 () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Rufuse tascis	m. org	
Address:	0	0	
Business phone: 213949	8082 Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW	v!
Client Name:		Ph	one #:
Client Address: Street	City	State	Zip

Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	, Agenda Item, or Case No. — G	
I wish to speak before the Nar	ne of City Agency, Department, Committee or	r Council		
Do you wish to provide general public	comment, or to speak for or against a propos	al on the agenda?	? () For proposal	
Name: Bitty Jos	speado		() Against proposal() General comments	;
Business or Organization Affiliation:	Dreat Teay Los	Drock	25	
Address:		9		
Street	City	State	Zip	
Business phone:	Representing:			_
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	W:	
Client Name:		P	hone #:	_
Client Address:	City	State	Zip	
	ortant information and submit this entire card			

Date Jan /73/7017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before theNar	ty Council me of City Agency, Department, Committee or	Council	
Do you wish to provide general public Name:	comment, or to speak for or against a propose $A \in \hat{A}$	al on the agenda?	 () For proposal () Against proposal (General comments
	Federación Poblana	USA	
Address: 3905	Los Angreles	(A)	9004 Zio
Business phone: <u>32363550</u>	45 Representing: Director	Sidle	2φ
	D SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW	V:
Client Name:		Ph	ione #:
Client Address:Street	City	State	Zip
Please see reverse of card for imp	portant information and submit this entire card	to the presiding of	ficer or chairperson.

CITY	OF LOS ANGELES SPEAKER	CARD
11,7111	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the LA City Name	of City Agency, Department, Committee or	Council
Do you wish to provide general public co	mment, or to speak for or against a proposa	
Name: Mulia Gray		() Against proposal (X) General comments
Business or Organization Affiliation:	E OUT OF LA	
Address: 33/ Glenhurst A	he Los Angeles	CA 90039 State Zip
	Representing:	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
	tant information and submit this entire card t	to the presiding officer or chairperson.

Date 125 2017	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. 1 - 6
I wish to speak before theNa	Imm grant a Aforra me of City Agency, Department, Committee or	Council
Do you wish to provide general public	comment, or to speak for or against a propose	
Name: Pasque Business or Organization Affiliation: _	11.0	() Against proposal () General comments
Address: 1010 Street		L' lendre CA 91202
Street Business phone: 323-627-5	City 874 Representing:	State Zip
CHECK HERE IF YOU ARE A PA	D SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
Please see reverse of card for im	portant information and submit this entire card	to the presiding officer or chairperson.

Date 1 25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No. - 6
I wish to speak before theName	i Smut Affante Com of City Agency, Department, Committee or	Council	
	omment, or to speak for or against a proposa		
Business or Organization Affiliation:	1 strong Lowy our Gu	XL	
Address: 714 W. Olyny		Of- State	90025 Zip
	SPEAKER AND PROVIDE CLIENT INFO	RMATION BELC	W:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

Date 1/25/17 THE CITY COUNCI DECORUM WILL B	L'S RULES OF	uncil File No., Agenda Item, or Case No.
I wish to speak before the <u>Orty</u> <u>Council</u> Name of City Agency, Dep	artment, Committee or Counc	* il
Do you wish to provide general public comment, or to speak	ior or against a proposal on th	
Name: Manuel Villanveux		 Against proposal General comments
Business or Organization Affiliation: ROC - CA		
Address: 1730 w. Olympic Blud Street	te 300 UN GA 900 Dity	State Zip
Business phone: 323 3851309 Representing:	me	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PR		
Client Name:		Phone #:
Client Address:Street	City	State Zip
Please see reverse of card for important information and	submit this entire card to the	presiding officer or chairperson.

Date 2817	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the	ame of City Agency, Department, Committee or	Council	
Do you wish to provide general public	ic comment, or to speak for or against a proposa	al on the agenda'	 Against proposal
Business or Organization Affiliation:	California Imm. You	njustice	Alliance
Address.	1		
Street	City	State	Zip
Business phone:	Representing:	. Die 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 -	
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	w:
Client Name:		P	hone #:
Client Address: Street			
Street	City	State	Zip
Please see reverse of card for in	nportant information and submit this entire card	to the presiding of	fficer or chairperson.

Date THE CITY COUNCIL'S RULES OF Council File No., Agenda lite Decorum WILL BE ENFORCED. PC 1-0	em, or Case No.
I wish to speak before the Ad Hoc on Immigrant Affairs Commit Name of City Agency, Department, Committee or Council	rec
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda?	proposal ainst proposal neral comments
Business or Organization Affiliation: Immigrant DeFenders Law Cent	er
Address: <u>634</u> S. Spring St. Flor 10 LA CA 90014 Street Street Zip	
Business phone: 236347181 Representing:	
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:]
Client Name: Phone #:	
Client Address:	
Street City State Zip	

	DUNCIL'S RULES OF /ILL BE ENFORCED.	Council File No., Agenda Item, or Case	No.
I wish to speak before the	Counce'	ttee or Council	
Do you wish to provide general public comment, or to s Name: <u>Yamilex</u> Rystrian Business or Organization Affiliation: <u>Children</u>	speak for or against a p n Over F	broposal on the agenda? TFor proposal () Against proposal General comm Chitics	sal 1ents
Address:	City	State Zip	
Business phone: (8/10)260-1993 Represent CHECK HERE IF YOU ARE A PAID SPEAKER AN			
Client Name:		Phone #:	
Client Address:Street	City	State Zip	

CITY O	F LOS ANGELES SPEAKER	CARD		
	E CITY COUNCIL'S RULES OF CORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.	
I wish to speak before the A 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? SFor proposal Name: <u>Jasmin Castillo</u> General comments Business or Organization Affiliation: <u>SEIU USWU</u>				
Address:Street				
Street Business phone:	City Representing:	State	Zip	
CHECK HERE IF YOU ARE A PAID SP	EAKER AND PROVIDE CLIENT INFOR	RMATION BEL	OW:	
Client Name:			Phone #:	
Client Address: Street	City	State	Zip	
Please see reverse of card for important	t information and submit this entire card t	to the presiding	officer or chairperson.	

СІТҮ	OF LOS ANGELES SPEAKER	CARD		
Date 25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.	
1		C		
	City Counci)			
Name	e 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 pr				
Name: Miller NS			General comments	
Business or Organization Affiliation:	hildren over Poutics		<u> </u>	
Address:Street				
Street	City	State	Zip	
Business phone:	Representing:			
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:				
Client Name:		Ph	none #:	
Client Address:	City	State	Zip	
	rtant information and submit this entire card			

CITY	OF LOS ANGELES SPEAKER	CARD	- 6
Date 1/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	genda Item, or Case No.
I wish to speak before the <u>A-B</u>	HOC on Immigration A	<u>C</u> .	/
Do you wish to provide general public co Name: <u>Gloría Sauce</u>	emment, or to speak for or against a propose \mathcal{AO}	I on the agenda?(() For proposal) Against proposal) General comments
Business or Organization Affiliation:	fermundod Mexicana	- T-	
Address: 7915 Van Nu	<u>145 Blok Parlorando City</u> Representing:	City Ca, State	912462 Zip
Business phone (4/4) 989-301	P Representing:	/	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW:	:
Client Name:		Pho	ne #:
Client Address:Street	City	State	Zip
Please see reverse of card for impor	tant information and submit this entire card t	to the presiding offic	cer or chairperson.

1 23 2017	UNCIL'S RULES OF LL BE ENFORCED.	Council File No	o., Agenda Item, or Case No. - G
I wish to speak before the <u>Ad hoc Commin</u> Name of City Agency	Hee On immin, Department, Committee	grant aff	airs
Do you wish to provide general public comment, or to sp	beak for or against a prop	osal on the agenda	
Name: Devon Porter			() Against proposal _ (General comments
Business or Organization Affiliation: ACLU	of Southern	Califor.	nia
Address: 1313 W 8th St. Los A	Dity	C A State	90017
Business phone: (213)977 - 5224 Representin			
CHECK HERE IF YOU ARE A PAID SPEAKER AN			
Client Name:		F	Phone #:
Client Address:			
Client Address:Street	City	State	Zip
Please see reverse of card for important information	and submit this entire ca	rd to the presiding	officer or chairperson.

I wish to speak before the LDS AMACLES LAW CONCL.	
Do you wish to provide general public comment, or to speak for or against a proposal on the agenda? Name: MATHIC ANECSON-BACKER	?()For proposal ()Against proposal ()General comments
Business or Organization Affiliation: MAFIPRAL LANDER Guild	600011
Address: 144B Chb Ven De LA CA Street 3BI-3246 City State Business phone: 213 3BI-3246 Representing:	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW	w:
Client Name: Pl	hone #:
Client Address: City State	Zip

Date 1-225,17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Age	enda Item, or Case No.
I wish to speak before theNa	me of City Agency, pepartment, Committee	ee or Council	
()) \ - () -	comment, or to speak for or against a pro	() For proposal) Against proposal) General comments
Business or Organization Affiliation: Address: 3374 STock by	Ton for Cond Sace	el gates	
Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A PAI	D SPEAKER AND PROVIDE CLIENT II	NFORMATION BELOW:	
Client Name:		Phon	e #:
Client Address:		Ototo	7:
Street	City	State	Zip
Please see reverse of card for imp	portant information and submit this entire	card to the presiding office	er or chairperson.

Date AN 23, 2017	THE CITY COUNCIL'S I DECORUM WILL BE EN		Council File No., A	genda Item, or Case No.
I wish to speak before the	LOC COMMITCE ame of City Agency, Departm	M MMg/M ent, Committee or Co	WA AAAIV	5
Do you wish to provide general public	comment, or to speak for o	r against a proposal (on the agenda? (
Name: Awn town the			() Against proposal
Business or Organization Affiliation:	Chinica Romen	0		
Address: 123 S. AlVar	Ado Strollf L	os Angeles	CA.	90057
Business phone: (213) 201-83	City Representing:	u)	State	Zip
CHECK HERE IF YOU ARE A PA	ID SPEAKER AND PROVI	DE CLIENT INFORM	ATION BELOW	:
Client Name:			Pho	ne #:
Client Address:Street	City		State	Zip
Please see reverse of card for im	portant information and sub	nit this entire card to	the presiding offic	<u>cer or chairperson.</u>

	-		
Date 01/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., /	Agenda Item, or Case No. -6
	Hoc Committee on me of City Agency, Department, Committee or		4
Do you wish to provide general public	comment, or to speak for or against a proposa	I on the agenda?	
Name: Carlos Vaguera	no		() Against proposal() General comments
Business or Organization Affiliation:	ALTH Salvadoran American	lacher thip 4	Elucitical form
Address: 4015 Bifel	St. Svik"A" LA	State	20017 Zip
Business phone: 23 1480-108	Representing:		
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT INFOR	MATION BELOW	/:
Client Name:		Ph	one #:
Client Address:	City	State	Zip
	portant information and submit this entire card t		

Date Jon 25, 2017	THE CITY COUNCIL'S RULES C DECORUM WILL BE ENFORCE	DF	o., Agenda Item, or Case No. - 6
I wish to speak before the	A. City Council Ad Hoz Co Name of City Agency, Department, Con	m en Anni zo nmittee or Council	ator
Do you wish to provide general pu	blic comment, or to speak for or against	a proposal on the agenda	
Name: TSMAEL	PARPA		 Against proposal (1) General comments
Business or Organization Affiliation	n: National Writers Union		
Address: 1149 Buetach	Au Lat	CA	Zip Zip
Street	City	State	Zip
Business phone:	Representing:		
	PAID SPEAKER AND PROVIDE CLIE		
Client Name:			Phone #:
Client Address:	City	State	Zip
Please see reverse of card for	important information and submit this e	ntire card to the presiding	officer or chairperson.

Date 1-25-17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I wish to speak before theNan	Hoen Transfort As	Council	
Do you wish to provide general public	comment, or to speak for or against a proposa	al on the agenda	a? (T) For proposal
Business or Organization Affiliation:	Alta mid Health	Services	
Address:Street	City	State	Zip
Business phone:	Representing:	-	
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	ow:
Client Name:			Phone #:
Client Address:	City	State	Zip
	ortant information and submit this entire card	to the presiding	officer or chairperson.

CIT	Y OF LOS ANGELES SPEAKER	CARD	
Date 25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
I wish to speak before the	A City me of City Agency, Department, Committee or	Council	
Do you wish to provide general public Name:	comment, or to speak for or against a propose $-\dot{Hiz}$ 5ETUUSWW		For proposal () Against proposal () General comments
Address:Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A PAIL	D SPEAKER AND PROVIDE CLIENT INFO	RMATION BELC	w:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip
Please see reverse of card for imp	portant information and submit this entire card	to the presiding o	officer or chairperson.

CITY	OF LOS ANGELES SPEAKER	CARD
10010	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $1 - 6$
I wish to speak before the A	HOC of City Agency, Department, Committee or	Council
Name: Rivel Mused	nment, or to speak for or against a propose <u>e</u> 2 time Coulition of 1	 () Against proposal () General comments
Address:	City Representing: Latino Coal	State LA PAJCH
	PEAKER AND PROVIDE CLIENT INFO	Act of
Client Name:		Phone #:
Client Address: Street	City	State Zip

Date 1/2517	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. $1 - 6$
I wish to speak before the A	e of City Agency, Department, Committee or	Council
Do you wish to provide general public co	omment, or to speak for or against a proposa	
Name: Sophia Cor	ten	() Against proposal() General comments
Business or Organization Affiliation:	ANA Latino (da	lition of L.A. PAR
Address:	O 24-	Okoko Zin
Business phone: 94927565	37 Representing: SANALA	State Zip Coalition of LAPP
CHECK HERE IF YOU ARE A PAID	SPEAKER AND PROVIDE CLIENT INFOR	RMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

	OF LOS ANGELES SPEAKER	CARD	
Date 125/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	Agenda Item, or Case No.
	Hy Council e 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? () Against proposal Name: <u>Advert Elizable</u> Business or Organization Affiliation: <u>Childben Over Politics</u>			
Address: Street	City	State	Zip
	Representing:		
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:			
Client Name:		P	hone #:
Client Address:Street		State	
riease see reverse of card for impo	rtant information and submit this entire card	to the presiding c	bricer of chairperson.

C	ITY OF LOS ANGELES SPEA	KER CARD /~6
Date 1/25/17	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No. Pcblic Commute
I wish to speak before the	Polic Comme	
1	Name of City Agency, Department, Commi	ttee or Council
	lic comment, or to speak for or against a p $(f(n)) \sigma p$ U C L A	() Against proposal
Business or Organization Affiliation	UCLA	
Address: Bund	$\frac{16}{8236} \frac{1}{\text{Representing:}} \frac{165}{2}$	Angels CA
Business phone: 310 415	8236 Representing:	Self
CHECK HERE IF YOU ARE A P	AID SPEAKER AND PROVIDE CLIENT	INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip
Please see reverse of card for i	mportant information and submit this entir	e card to the presiding officer or chairperson.

Date THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Ag	genda Item, or Case No.
I wish to speak before the Name of City Agency, Department, Committee or C	ARA'(F	35
Do you wish to provide general public comment, or to speak for or against a proposal Name: MINC HARNANDE) For proposal) Against proposal / General comments
Business or Organization Affiliation: Address: <u>3442</u> <u>Acteory</u> <u>Street</u> Business phone: <u>213 944-4449</u> Representing:	RDOBS State	Zip
CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORM	MATION BELOW	:
Client Name:	Pho	ne #:
Client Address:City	State	Zip

Date 1-25-19	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File $1 - 6$	No., Agenda Item, or Case No.
I wish to speak before the Ad	Hoc on Immigrant Affa Name of City Agency, Department, Committ	tee or Council	rttee
Do you wish to provide general p	public comment, or to speak for or against a pr	roposal on the agend	la? (🔨) For proposal
Name: <u>leonardo</u> C	husán		() Against proposal (X) General comments
Business or Organization Affiliati	ion: Latino Coalition of (os Angeles	PAC/CARESING
Address: <u>4073</u> Irvin Street	g PL Culves City City	State	90232 Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BEI	-OW:
Client Name:			Phone #:
Client Address:	City	State	Zip
Please see reverse of card for	or important information and submit this entire	card to the presiding	g officer or chairperson.