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Date 12/1/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Homelessness & Brevier Name of City Agency, Department, Committee of	Countle
Do you wish to provide general Name: Luda Vo	public comment, or to speak for or against a propo	sal on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affilia	tion:	
Stroot	Oxford Are Harena	State / Zin
Business phone: 30600	-6467 Representing: OVFORD 7	ripigle Association
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 12.7.16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED		No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Comm		e
Name: Rows	public comment, or to speak for or against a	7.5	() Against proposal () General comments
Business or Organization Affiliat	ion: Venice Comm	unity Hou	81hg
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BEL	_ow:
Client Name:			Phone #:
Client Address:	City	State	Zip

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Date 12.7.16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case N
I wish to speak before the	Homeless + Poverty Name of City Agency, Department, Committee	
Do you wish to provide genera	al public comment, or to speak for or against a pr	
Name: Rachel	Pedowicz	() Against proposa () General comme
Business or Organization Affili	ation: Safe Place for	Jonah
Address: Street	ICE, CA	State Zip
	Representing:	
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 12/7/2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Council File No., Agenda Item, or Case		
wish to speak before the		AND POVERTY gency, Department, (Council	
Do you wish to provide general Name: EPIC MCNEVI Business or Organization Affilia	N				? (X) For proposal () Against proposal () General comments
Address: 8557 Hicken				CA	90232
Street Business phone: 310-831-	119 Repre	City esenting:		State	Zip
CHECK HERE IF YOU ARE	A PAID SPEAKE	R AND PROVIDE C	LIENT INFOF	RMATION BELO	ow:
Client Name:				P	hone #:
Client Address:		City		State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 2.7.16		UNCIL'S RULES OF ILL BE ENFORCED.	Council File No., Agenda It	em, or Case No.
I wish to speak before the		+ Poverty y, Department, Committee	Committee ee or Council	
Do you wish to provide genera	I public comment, or to s	peak for or against a pr	oposal on the agenda? () For () Age () Ge	proposal ainst proposal neral comments
Business or Organization Affilia	ation:			
Address: Street	vice, CA			
Street		City	State Zip	
Business phone:	Represent	ing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AN	ID PROVIDE CLIENT	INFORMATION BELOW:	
Client Name:			Phone #:	
Client Address:				

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Date 12.7.16		NCIL'S RULES OF L BE ENFORCED.	Council File No.	., Agenda Item, or Case No.
I wish to speak before the	Homeless Name of City Agency, D	Poverty Co Department, Committee		
Do you wish to provide general	. 1	ak for or against a prop	osal on the agenda	? H For proposal () Against proposal
Name: Mame	Kennedy			() General comments
Business or Organization Affiliati	on: Vernce	Communi	ty Hous	ing
Address: Venue	CA,	City	State	Zip
Business phone:	Representing	:		
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND	PROVIDE CLIENT IN	FORMATION BELC	ow:
Client Name:			P	hone #:
Client Address:		Citv	State	Zip

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Date	THE CIT	TY COUNCIL'S RULES OF	Council File N	o., Agenda Item, or Case No.
12-7-16	DECOR	UM WILL BE ENFORCED.		
wish to speak before the _ 1		Agency, Department, Committee		
Do you wish to provide general p	oublic comment,	or to speak for or against a p	roposal on the agenda	a? (For proposal
Name: Erika Lee				() Against proposal () General comments
Business or Organization Affiliati	on: Venice	e Resident/Venic	a Community	Housing
Address: 1012 breev Street	1 11. 42	Venil	CA State	90291
Business phone: (36)266-				p
CHECK HERE IF YOU ARE A	A PAID SPEAKE	ER AND PROVIDE CLIENT	INFORMATION BEL	ow:
Client Name:				Phone #:
Client Address:				
Street		City	State	Zip

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Date 12.7.16		CIL'S RULES OF BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the _	Homeless Name of City Agency, D	+ poverty epartment, Committee		tee
Do you wish to provide gene Name:	eral public comment, or to spea	ak for or against a pro	pposal on the agenda?	For proposal Against proposal General comments
Business or Organization Af	filiation: Vemce	Commun	My Hone	sing
Address:Street		City	State	Zip
Business phone:	Representing:			
CHECK HERE IF YOU AF	RE A PAID SPEAKER AND I	PROVIDE CLIENT II	NFORMATION BELOV	v:
Client Name:			Ph	one #:
Client Address:		City	State	Zip

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Date 12.7.16	THE CITY COUNCIL'S RU DECORUM WILL BE ENF	JEEO OI	File No., Agenda Item, or Case No.
I wish to speak before the	Hameless & Po		wheel
1.4	public comment, or to speak for or a		genda? (For proposal () Against proposal () General comments
Business or Organization Affilia	\ I. « \	ommunity	Housing
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:	City	State	Zip

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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date [2] 7 [] 6	THE CITY COUNCIL DECORUM WILL BE		Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Depa	rerty Committee	or Council	
Do you wish to provide genera	al public comment, or to speak for	or or against a prop	osal on the agenda	? (For proposal
Name: Steve		American de la companya de la compan		() Against proposal () General comments
Business or Organization Affili	ation: LACAW			
Address: C	38 E. GM St	LACA	90021	
Street	C	ty	State	Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PRO	OVIDE CLIENT INF	FORMATION BEL	ow:
Client Name:				Phone #:
Client Address:Street		itv	State	Zin



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EXCEPT TO THE EXTENT NECESSARY FOR THE PRESIDING OFFICER TO CALL UPON YOU

Date 17/7/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Ite	
I wish to speak before the	OMELESSIVESS T POVERY Name of City Agency, Department, Commit	T COMM (TEE tee or Council	
Do you wish to provide general p	oublic comment, or to speak for or against a p	(X) Aga	oroposal inst proposal eral comments
Business or Organization Affiliation	on: export trimble	ASSOCIATION	
Address: Street	THATCHER AVE.	VENCE CA 9 State Zip	0292
Business phone: 340 825	-6811 Representing: SELF		
	A PAID SPEAKER AND PROVIDE CLIENT		
Client Name: Client Address:		Phone #:	
Street	City	State Zip	

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Date 2 7 6 I wish to speak before the	THE CITY COUNCIL DECORUM WILL BI Name of City Agency, Department	E ENFORCED.	Conte	, Agenda Item, or Case No.
Do you wish to provide general Name: To mm Business or Organization Affilia	public comment, or to speak for the speak fo	for or against a propo	osal on the agenda	or proposal () Against proposal () General comments
Address:Street	(City	State	Zip
Business phone:	Representing:			
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PR	OVIDE CLIENT INF	ORMATION BELO	ew:
Client Name:			P	hone #:
Client Address:Street		City	State	Zin

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Date 12/7/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.	, Agenda Item, or Case No.
wish to speak before the	Name of City Agency, Department, Committee	ee or Council	
Name: Rlake Coddin	oublic comment, or to speak for or against a property on: Thomas Safur ? Assurtes	roposal on the agenda	? () For proposal () Against proposal () General comments
	use blud LA	CA	90049
	Representing:	State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BELO	ow:
Client Name:		P	hone #:
Client Address:Street	City	State	Zip

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Date 17-7-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	ee or Council	
Do you wish to provide generation Affi	ral public comment, or to speak for or against a pro-	oposal on the agenda?	For proposal Against proposal General comments
Address:			
Street	City	State	Zip
Business phone:	Representing:		
	E A PAID SPEAKER AND PROVIDE CLIENT I		w:
Client Address:			
Street	City	State	Zip

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Date () - 7-16	THE CITY COUNCIL'S RULE DECORUM WILL BE ENFOR	/	e No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department,		
Do you wish to provide general Name:	public comment, or to speak for or aga	inst a proposal on the ager	nda? For proposal () Against proposal General comments
Business or Organization Affiliati	on: Self Residu	J-	
Address: Street	ean funtually city	Venue et	90291 zip
Business phone:	Representing:	f Resident	_
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE O	LIENT INFORMATION B	ELOW:
Client Name:			_ Phone #:
Client Address:	City	State	Zin

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Dec. 7, 2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		, Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or	Council	
	public comment, or to speak for or against a proposition of the speak fo	al on the agenda	? () For proposal Against proposal () General comments
	on:		
Address:Street	City	State	Zip
Business phone:	Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		P	hone #:
Client Address:	City	State	Zip

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Date	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
12/7/16	DECOROW WILL BE ENFORCED.	16-0600-5-145
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 propos	sal on the agenda? () For proposal
Name: Diane Fle	tcher-Hoppe	(*) Against proposal (*) General comments
Business or Organization Affiliat	ion: Oxford Triangle Heights	on
Address: 950 0x6	and Ave Magnina Dal Rey C.	A 90292
	-3301 Representing: Oxford Trans	
	A PAID SPEAKER AND PROVIDE CLIENT INFO	DRMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 12-1-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or	Council
Do you wish to provide general pundle Mame:	ablic comment, or to speak for or against a propose	al on the agenda? () For proposal (Against proposal
Address: 3107 T Street Business phone: 310-435	hatcher Ave. City.	CA 90292 State Zip
		PRMATION BELOW:
Client Name:		Phone #:
Client Address:Street	City	State Zip

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Date 12-7-16		COUNCIL'S RULES OF I WILL BE ENFORCED.	,	, Agenda Item, or Case No.
I wish to speak before the		ncy, Department, Comm	nittee or Council	
Do you wish to provide gene Name: EVANYE Business or Organization Affi	ral public comment, or t	o speak for or against a	proposal on the agenda	? () For proposal Against proposal () General comments
Address:Street Business phone:310-	795-1008	City	State	Zip
CHECK HERE IF YOU AR			T INFORMATION BELC	ow:
Client Name:			P	hone #:
Client Address:Street		City	State	Zip

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Date Dec 7, 2016	THE CITY COUNCIL'S RULES O DECORUM WILL BE ENFORCED	
I wish to speak before the	Name of City Agency, Department, Com	
Do you wish to provide general	public comment, or to speak for or against	a proposal on the agenda? () For proposal
Name: Make Right	wer	() Against proposal () General comments
Business or Organization Affiliat	ion: Verice Stakehold	les 4585 f
Address: 615 An	dalusia Ave Venice 6265 Representing:	CA 90281
Business phone: 310 871	6165 Representing:	State Zip
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIEN	NT INFORMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

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Date 12-7 - 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Do you wish to provide gene	eral public comment, or to speak for or against a prop TS TOHNSON	oosal on the agenda?	For proposal Against proposal Comments
	filiation:		
Street	City	State	Zip
Business phone:	Representing:		
	RE A PAID SPEAKER AND PROVIDE CLIENT IN		
Client Address:Street	City	State	Zip

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Date		Council File No	, Agenda Item, or Case No.
	THE CITY COUNCIL'S RULES OF	Council File No.	, Agenda Item, or Case No.
12-7-16	DECORUM WILL BE ENFORCED.	to 1	·
I wish to speak before the			
	Name of City Agency, Department, Committee of	or Council	
	ral public comment, or to speak for or against a propo		() Against proposal
Name: Gage	Bennett		() General comments
Business or Organization Affil	liation:		
Address:			
Street	City	State	Zip
Business phone:	Representing:		
CHECK HEBE IE AUII VBE	E A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION RELC	w.
ONEON HERE II TOO ARE	E A PAID OF EARLY AND PROVIDE CEIENT IN	ONWATION BLEC	, vv.
Client Name:		P	hone #:
Olionat Andalus and			
Client Address:Street	City	State	Zip

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Date 12-7-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case	e No.
I wish to speak before the	Hone 1385 & Poo Name of City Agency, Department, Committee		
Do you wish to provide general	public comment, or to speak for or against a prop	osal on the agenda? () For proposal Against propo () General com	
Business or Organization Affiliati	ion:		
Address:Street	City	State Zip	
Business phone: 48	3740 Representing:	State Zip	
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	

	CITY OF LOS ANGELES SPEAKER	
YOU ARE NO	IS A PUBLIC DOCUMENT SUBJECT TO POSTING ON T REQUIRED TO PROVIDE PERSONAL INFORMATIO HE EXTENT NECESSARY FOR THE PRESIDING OFFI	N IN ORDER TO SPEAK, FOR
Date 12/7/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or	
Do you wish to provide general p	oublic comment, or to speak for or against a propos	al on the agenda? () For proposal () Against proposal () General comments
Business or Organization Affiliation	on: Community RES	STORENT
Address: 416 VENICA Street Business phone: 917 573	E CAMPL VENICE	State Zip
	PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELOW:
Client Name:		Phone #:
Client Address:	City	State Zip

DNS FOR RECORD

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Date 12-7-16		' COUNCIL'S RUL M WILL BE ENFOI	-0 0.	Council File No., A	genda Item, or Ca	se No.
I wish to speak before the	HOWE LESS Name of City Ag	+ POVER			Life Bona	7)
Do you wish to provide general		to speak for or aga	ainst a proposal on	the agenda? () For proposal Against prop	oosal
Name: Mark	Shockley			(General con	
Business or Organization Affiliati		Oxford	Thangle	ASSC	ciation	
Address: QQ Street	DICKSON	Street	Marinad	el Rey	Ca 9	0292
Business phone: 310-770 -	-3860 Repres	senting:				
CHECK HERE IF YOU ARE A	A PAID SPEAKER	AND PROVIDE	CLIENT INFORMA	TION BELOW	: 🔲	
Client Name:				Pho	ne #:	
Client Address:Street		City		State	Zip	

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DNS FOR RECORD

Date (2/1/6	THE CITY COUNCIL'S RU DECORUM WILL BE ENFO	ELO OI	No., Agenda Item, or Case No.
wish to speak before the			
	Name of City Agency, Departmen	t, Committee or Council	
	ublic comment, or to speak for or a	gainst a proposal on the agend	da? () For proposal (×) Against proposal
Name: CHANG	NOIN		() General comments
Business or Organization Affiliation	on: KITIKON		14
Address: 654 MI(DATE CA City	State	9029 2029
Business phone:	Representing:	FNICE -	
	PAID SPEAKER AND PROVIDE		LOW:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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Date 12-7-14	THE CITY COUNCIL'S I	IOLLO OI	Council File No.,	Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Departm	ent, Committee or Cour	ncil	
Do you wish to provide general	public comment, or to speak for o	r against a proposal on	the agenda?	() For proposal
Name: Zelda L	.ambrecht			() General comments
Business or Organization Affilia	tion: Venice Re	sident		
Address: 2419 C	CEAN AUE City	Venuce	CA	9029
Street Business phone: 3/0 920	City Representing:	mmoniky	State	Zip
	A PAID SPEAKER AND PROVI	/	TION BELO	w:
Client Name:			Ph	one #:
Client Address:	City		State	Zip

D. N.S RECORD

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ZXOZI I IO I	THE EXTENT REGEOGRAM TON THE TREGOTAGE OF THE	OLIT TO OALL OF	
Date 12-7-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No	o., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee or	Council	nifee
	public comment, or to speak for or against a propos	al on the agenda	? X) For proposal () Against proposal
900	C. Groening	> 1/00	() General comments
Business or Organization Affiliati	awland Canal 329 How	are Can	130 U 2002 U 1
Business phone: 3 to 869		ents for	nousing. Ultimes
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BEL	OW:
Client Name: Client Address: Street	City	State	Phone #:
SHEEL	City	State	Zip

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D.N.S E. RECORD

Date 12-7-16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or	Case No.
I wish to speak before the	Name of City Agency, Department, Committee	Po U	
Do you wish to provide general	I public comment, or to speak for or against a pr	roposal on the agenda? () For propos	sal
Name:	Rita Silverman	Against profit () General c	
,	ation:		
Address:			
Street	City	State Zip	
Business phone:	Representing:		
	A PAID SPEAKER AND PROVIDE CLIENT		
Client Address:			
Street	City	State Zip	

D.N.S

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FOR RECORD

Date	THE CITY COUNCIL'S RULES OF	Council File No., A	genda Item, or Case No.
12-7-16	DECORUM WILL BE ENFORCED.	7	*7
I wish to speak before the	Name of City Agency, Department, Committee of) . or Council	
Do you wish to provide general	public comment, or to speak for or against a propo	sal on the agenda?) For proposal
Name: GARY COV	2	(Against proposal General comments
Business or Organization Affiliati	ion: RESIDENT		
Address: 321 2 10	LA PL MARINA DEL	REY C9	90292
Business phone: 310 741	-0505 Representing: SeLF	State	ZIP
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW	/:
Client Name:		Pho	ne #:
Client Address:			
Street	City	State	Zip