| CITY OF LOS ANGELES SPEAKER<br>NOTE: THIS IS A PUBLIC DOCUMENT. YOU ARE NOT REQ<br>PERSONAL INFORMATION IN ORDER TO SPEAK, EXCEP<br>NECESSARY FOR THE PRESIDING OFFICER TO CAL  | UIRED TO PROVIDE        | #5   |
|---|-------------------------|--|
| Date<br>10-20-15  | Agenda Item<br>15 - 103 | 8  |
| I wish to speak before the BOARD OF PUBLIC WORKS  |                         |  |
| 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 propose<br>Name: <u>MA</u> <u>Cornepp</u><br>Business or Organization Affiliation: <u>Seven Willlem Grant S</u><br>Address: <u>2520</u> <u>S. West View St. LiA</u><br>Street<br>Business phone: <u>373-734-1165</u> Representing: <u>Seven</u> |                         | ) For proposal<br>) Against proposal<br>) General comments<br>W/SourceOD 1 (OZip |
| CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFO  | RMATION BELOW:          |  |
| Client Name:  | Phone                   | e #:   |
| Client Address:  Street City  | State                   | Zip  |

| NOTE: THIS IS A                         | Y OF LOS ANGELES SP<br>A PUBLIC DOCUMENT. YOU ARE<br>FORMATION IN ORDER TO SPEA<br>ARY FOR THE PRESIDING OFFIC | NOT REQUIRED TO F<br>AK, EXCEPT TO THE E | EXTENT // J   |
|---|--|--|---|
| Date                                    |  | Agenda Item                              |   |
| 10-20-15                                |  | 15                                       | -1038   |
| I wish to speak before the              | BOARD OF PUBLIC WORK   | KS                                       |   |
|   | me of City Agency, Department, Co  | mmittee or Council                       |   |
| Do you wish to provide general public   | comment, or to speak for or again  | st a proposal on the age                 |   |
| Name: AMi Mote                          | valli  |  | <ul><li>( ) Against proposal</li><li>( ) General comments</li></ul> |
| Business or Organization Affiliation: _ | Cuty of Las Ang  | cles, DCA                                | Willian Grat Stil   |
| Address: 2520 5. Wes                    | + View St. LA<br>City  | CA                                       | 900,26  |
| Business phone: _323-734-11             | LT Representing:   |  |   |
| CHECK HERE IF YOU ARE A PAI             | D SPEAKER AND PROVIDE CLI  | ENT INFORMATION E                        | BELOW:  |
| Client Name:                            |  |  | Phone #:  |
| Client Address:Street                   | City   | State                                    | Zip   |

|  | DUNCIL<br>LE NO            | AGENDA<br>ITEM NO                                       |
|--|----------------------------|---|
| POSITION: Support<br>Project/Proposal    | Oppose<br>Project/Proposal | General or<br>Public Comment                            |
| SPEAKER:                                 | V Oppose Appeal            |   |
| Applicant Property Owner(s)              |                            | resentative<br>ck here if you are a paid representative |
| Appellant Surrounding<br>Property Owners | Organization Othe          | er  |
| Name EVA Aubry                           |                            |   |
| Representing West Alem                   | s N.e.ghbarhood            | l'Counter   |
| Address 2910 Westvice                    | e SE                       |   |
| City Los Angole 5                        | Zip                        | Code 90016  |
|  |                            | e card to the presiding officer or chairperson.         |
| NC NC                                    | DTE: THIS IS A PUBLIC DOCU | JMENT.  |

| CITY OF LOS ANG<br>PLANNING & LAND USE MANAGEMENT C<br>THE CITY COUNCIL'S RU<br>DECORUM WILL BE ENFO | COMMITTEE SPEAKER CARD 45                                  |
|--|--|
| DATE 10/20/15 FILE NO.   | AGENDA<br>ITEM NO. 15-1038                                 |
| POSITION: Support Oppose Project/Proposal  | General or<br>Public Comment                               |
| SPEAKER:   |  |
|  | Representative Check here if you are a paid representative |
| Appellant Surrounding Organization   | Other  |
| NameRepresenting   |  |
| Address 2700 West View Stu   | zeb  |
| city las Angeles   | Zip Code 90016   |
| Please see reverse of card for important information and submit this e<br>NOTE: THIS IS A PUBLIC D   |  |

| PLA             | CITY OF LOS ANGELI<br>ANNING & LAND USE MANAGEMENT COM<br>THE CITY COUNCIL'S RULES<br>DECORUM WILL BE ENFORCE | MITTEE SPEAKER CARD                                   |
|-----------------|---|---|
| DATE 10/20/     | 2015 COUNCIL 5  | AGENDA<br>ITEM NO. 15-1036                            |
| POSITION:       | Support Oppose<br>Project/Proposal  | General or<br>Public Comment                          |
| SPEAKER:        | Support Appeal Oppose Appeal  |   |
| Applicant       |   | esentative<br>k here if you are a paid representative |
| Appellant       | Surrounding<br>Property Owners  | r   |
| Name Marya      | m Husseinzadel  |   |
| Representing    | he Husseinzadel<br>self / william Grant Shill Arts Cent   | er - City of LA DIA                                   |
| Address 2526    | s. West View  | s   |
| City UA         | Zip   | Code 90016  |
| Please see reve | erse of card for important information and submit this entire   | card to the presiding officer or chairperson.         |

| DATE 10-2       | 0-15                         | COUNCIL<br>FILE NO. <u>\</u> | 5-1038                   |            | AGENDA                      |                         |
|-----------------|------------------------------|------------------------------|--------------------------|------------|-----------------------------|-------------------------|
| POSITION:       | Support Project/Propos       | al a                         | Oppose<br>Project/Propos | sal        | General or<br>Public Corr   |                         |
| SPEAKER:        | Support Appea                | J                            | Oppose Appea             | al         |                             |                         |
| Applicant       | Property Owne                | er(s) Associa                | tion                     | Representa | tive<br>f you are a paid re | epresentative           |
| X Appellant     | Surrounding<br>Property Owne | Organiz<br>ers               | ation                    | Other      |                             |                         |
| Name FR-A       | NE A. W.                     | eiser-                       |                          |            |                             |                         |
| Representing    | TTORNEY                      | FOR APP                      | eller.                   | BALUS      | show G.                     | PATCL, Truster          |
| Address 34      | 60 Within                    | e Alus, 5                    | 4. 1212                  |            |                             |                         |
| City \_ oS      | ANGelos                      | CA                           |                          | Zip Code _ | 90010                       | (2:3)354-6964           |
| Please see reve | erse of card for impo        | rtant information a          |                          |            |                             | officer or chairperson. |

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

| DATE 10/20/15 FILE NO. 15 -10  | 238 AGENDA<br>ITEM NO. 5                                  |
|--|---|
| POSITION:       Support       Oppose         Project/Proposal       Project/Pr         Support Appeal       Oppose A |   |
| SPEAKER:   | ppear   |
| Applicant Property Owner(s) Association  | Check here if you are a paid representative               |
| Appellant Surrounding Organization   | Other <u>APD</u>  |
| Name   |   |
| Representing LAPD SOUTHWENT ARTUR<br>Address 1546 W. MLK JR BC   | 7-  |
| Address 1546 w. MLK JR BC  |   |
| City   | Zip Code 7006 2   |
| Please see reverse of card for important information and submit  | this entire card to the presiding officer or chairperson. |

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THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

| DATE 10/20      | 0/15 F  | OUNCIL<br>ILE NO.       |                       | AGENDA                               | 5                  |
|-----------------|---|-------------------------|-----------------------|--------------------------------------|--------------------|
| POSITION:       | Support<br>Project/Proposal<br>Support Appeal | Oppose<br>Project/Pr    |                       | General or<br>Public Comme           | nt                 |
| SPEAKER:        |   |                         |                       |                                      |                    |
| Applicant       | Property Owner(s)                             | Association             | Represer<br>Check her | ntative<br>e if you are a paid repre | sentative          |
| Appellant       | Surrounding<br>Property Owners                | Organization            | Other                 | CD 10                                |                    |
| Name Jorda      | on Beroulhi                                   | M                       |                       |                                      |                    |
| Representing    | (0 10   |                         |                       |                                      |                    |
| Address         |   |                         |                       |                                      |                    |
| City            |   |                         | Zip Code              | 9                                    |                    |
| Please see reve | erse of card for importan                     | t information and submi | t this entire card    | I to the presiding office            | er or chairperson. |

| CITY OF LOS AND<br>PLANNING & LAND USE MANAGEMENT<br>THE CITY COUNCIL'S RU<br>DECORUM WILL BE END | COMMITTEE SPEAKER CARD  |
|---|---|
| DATE 10 2012015 COUNCIL<br>FILE NO.   | AGENDA<br>ITEM NO.  |
| POSITION: Support Oppose Project/Proposal Project/Proposal  | al General or<br>Public Comment                               |
| Support Appeal Oppose Appea   |   |
| Applicant Property Owner(s) Association   | Representative<br>Check here if you are a paid representative |
| Appellant Surrounding Organization  | Other   |
| Name AlexAndria Khan  |   |
| Representing AdAMS GOURDEN INN  |   |
| Address 4905 WEST Adams BIND  | ۶   |
| City LOS ANGELES, CA  | Zip Code 90816  |
| Please see reverse of card for important information and submit this                              |   |
| NOTE: THIS IS A PUBLIC I  | DOCUMENT.   |

| CITY OF LOS AN<br>PLANNING & LAND USE MANAGEMENT<br>THE CITY COUNCIL'S R<br>DECORUM WILL BE EN | COMMITTEE SPEAKER CARD  |
|--|---|
| DATE 0 20 2015 COUNCIL<br>FILE NO.   | AGENDA  |
| POSITION: Support Oppose Project/Proposal Project/Proposal                                     | General or<br>Public Comment                                  |
| Support Appeal Oppose Appea<br>SPEAKER:  | al  |
| Applicant Property Owner(s) Association  | Representative<br>Check here if you are a paid representative |
| Appellant Surrounding Organization   | ] Other   |
| Name StellA IVAS EL QUINIEL  |   |
| Representing HOAND GARDENN   |   |
| City LOS ANGELES, CA   | Zip Code 900/6  |
| Please see reverse of card for important information and submit this                           |   |

| DATE 10/2       | 0/2015 C                       | OUNCIL<br>LE NO         |                      | AGENDA<br>ITEM NO.                        |
|-----------------|--------------------------------|-------------------------|----------------------|---|
| POSITION:       | Support<br>Project/Proposal    | Project/P               | roposal              | General or<br>Public Comment              |
|                 | Support Appeal                 | Oppose A                | Appeal               |   |
| SPEAKER:        |                                |                         |                      |   |
| Applicant       | Property Owner(s)              | Association             | Represent            | ative<br>if you are a paid representative |
| Appellant       | Surrounding<br>Property Owners | Organization            | Other                |   |
| Name NAN        | ITU KHA                        | SN A                    |                      |   |
| Representing 4  | 905 WEST                       | AdAMS BII               | 0.                   |   |
| Address AdiA    | MSGARDEN -                     | TAN                     |                      |   |
| city LOS AN     | JELES, CA                      |                         | Zip Code             | 95016                                     |
| Please see reve | rse of card for importan       | t information and submi | t this entire card t | o the presiding officer or chairperson.   |
|                 | Ν                              | OTE: THIS IS A PUB      | LIC DOCUMEN          |   |

### CITY OF LOS ANGELES SPEAKER CARD NOTE: THIS IS A PUBLIC DOCUMENT, 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 Agenda Item 10115 BOARD OF PUBLIC WORKS 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 Name: NICOLE MONTEMAYOR General comments Business or Organization Affiliation: Address: <u>21028</u> <u>S.</u> <u>LONGUODOO</u> <u>AVE, LA, CA</u> <u>900</u> <u>U</u> Street Business phone: <u>818-389-9187</u> Representing: <u>MJSelf + MJ</u> <u>Neighborehoo</u> CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address: Street City State Zip

### CITY OF LOS ANGELES SPEAKER CARD

#### NOTE: THIS IS A PUBLIC DOCUMENT. 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                                 |                                 |                      | Agenda Item       | 0  |
|--------------------------------------|---------------------------------|----------------------|-------------------|--|
| 10-20-15                             |                                 |                      | 15-10             | 38 (5)   |
| I wish to speak before the           | BOARD OF PUBLIC                 | WORKS                |                   |  |
|                                      | Name of City Agency, Departm    | ent, Committee or    | Council           |  |
| Do you wish to provide general put   | blic comment, or to speak for c | or against a proposa | al on the agenda? | () For proposal 999  |
| Name: Mma-Syra                       |                                 |                      |                   | <ul> <li>( ) For proposal</li> <li>( ) General comments</li> </ul> |
| Business or Organization Affiliation | resident                        |                      |                   |  |
| Address: 2339 LU                     | cerne Ave                       | LOS Angi             | eles CA           | 90016  |
| Business phone (310) (228-6)         |                                 |                      | Otato             |  |
| CHECK HERE IF YOU ARE A F            | AID SPEAKER AND PROVI           | DE CLIENT INFOR      | RMATION BELO      | N:   |
| Client Name:                         |                                 |                      | Ph                | one #:   |
| Client Address:Street                | City                            |                      | State             | Zip  |
|                                      |                                 |                      |                   |  |

### CITY OF LOS ANGELES SPEAKER CARD NOTE: THIS IS A PUBLIC DOCUMENT. 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 Agenda Item 15-102E 10-20-15 BOARD OF PUBLIC WORKS 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 Name: Vesin Business or Organization Affiliation: Address: Street State Zip Business phone: Representing: CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW: Client Name: Phone #: Client Address: Street Citv State Zip

| CITY OF LOS AND   | GELES SPEAKER                           | CARD                  | $\langle \rangle$   |
|---|---|-----------------------|---|
| NOTE: THIS IS A PUBLIC DOCUME<br>PERSONAL INFORMATION IN ORI<br>NECESSARY FOR THE PRES  | DER TO SPEAK, EXCEP                     | T TO THE EXTENT       |   |
| Date  |   | Agenda Item           |   |
| 11-20-15  |   | 15-103                | 8   |
| I wish to speak before the BOARD OF PU  | BLIC WORKS                              |                       |   |
|   | epartment, Committee or (               | Council               |   |
| Do you wish to provide general public comment, or to spea<br>Name: <u>Clen</u> <u>JA90d21105</u><br>Business or Organization Affiliation: <u>FRIENDS</u><br>Address: <u>5007 W ADAMS 6C</u><br>Street<br>Business phone: <u>909-272-8943</u><br>Representing:<br>CHECK HERE IF YOU ARE A PAID SPEAKER AND F | Ki<br>A WEST ADA<br>Los Angeles<br>City | ams As.<br>9<br>State | ) Against proposal<br>) General comments<br>Soc<br>USI 6<br>Zip |
|   |   |                       |   |
| Client Name:  |   | Phon                  | е #:  |
| Client Address:Street   | City                                    | State                 | Zip   |

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

| DATE 0-2                          | 20-15                        | COUNCIL<br>FILE NO.       |                     | AGENDA<br>ITEM NO                          | 5                  |
|-----------------------------------|------------------------------|---------------------------|---------------------|--|--------------------|
| POSITION:                         | Support<br>Project/Propos    | al Oppo                   | se<br>ct/Proposal   | General or<br>Public Comme                 | nt                 |
|                                   | Support Appea                | al Oppo                   | se Appeal           |  |                    |
| SPEAKER:                          |                              |                           | /                   |  |                    |
| Applicant                         | Property Owne                | er(s) Association         |                     | esentative<br>here if you are a paid repre | sentative          |
| Appellant                         | Surrounding<br>Property Owne | Organization Organization | Other               |  |                    |
| Name La                           | Queta                        | Artis                     |                     |  |                    |
| Representing                      | rdams                        | Garden                    | Ing                 |  |                    |
| Address 4509 W. Adams Blud, RM 23 |                              |                           |                     |  |                    |
| City Los                          | Angeles                      | l -                       | Zip C               | ode 90016                                  |                    |
| Please see reve                   | erse of card for impo        | rtant information and su  | ubmit this entire o | card to the presiding office               | er or chairperson. |

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

| DATE 10/20/15 COUNCIL DIR-2015                                     | 5-009.4- EV ITEM NO. 5                                  |
|--|---|
| POSITION: Support Oppose Project/Proposal Project/Prop             | osal General or<br>Public Comment                       |
| Support Appeal Oppose App  | eal   |
| SPEAKER:   |   |
| Applicant Property Owner(s) Association                            | Check here if you are a paid representative             |
| Appellant Surrounding Organization                                 | Other   |
| Name ANNE K MURPHY   |   |
| Representing ADAMS GARDEN INN                                      |   |
| Address 4905 W ADAMS BL #32  |   |
| CityUA   | Zip Code 90016  |
| Please see reverse of card for important information and submit th | is entire card to the presiding officer or chairperson. |

| date <u>10</u> -  | 1 . 12                         | DUNCIL<br>LE NO      |                                       | AGENDA                                |    |
|---|--------------------------------|----------------------|---------------------------------------|---------------------------------------|----|
| POSITION:   | Support<br>Project/Proposal    | Oppose<br>Project/Pr | · · · · · · · · · · · · · · · · · · · | General or<br>Public Comment          |    |
| SPEAKER:  |                                |                      | ppear                                 |                                       |    |
| Applicant   | Property Owner(s)              | Association          | Representa<br>Check here i            | tive<br>f you are a paid representati | ve |
| Appellant   | Surrounding<br>Property Owners | Organization         | Other                                 |                                       |    |
| Name Eddi   | 6 Gorue                        |                      |                                       |                                       |    |
| Representing  |                                |                      |                                       |                                       |    |
| Address 4905 W. ADAMS   |                                |                      |                                       |                                       |    |
| City Los A  | ngelis                         |                      | Zip Code                              | 90016                                 |    |
| Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.<br>NOTE: THIS IS A PUBLIC DOCUMENT. |                                |                      |                                       |                                       |    |

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

| DATE 10/20/1            | 5 COUNCIL<br>FILE NO.             |                              | AGENDA 5                              |
|-------------------------|-----------------------------------|------------------------------|---------------------------------------|
|                         |                                   | ppose<br>oject/Proposal      | General or<br>Public Comment          |
|                         | upport Appeal 🗌 O                 | opose Appeal                 |                                       |
| SPEAKER:                |                                   | . /                          |                                       |
| Applicant Pr            | roperty Owner(s) Association      |                              | ve<br>you are a paid representative   |
|                         | urrounding Organizati             | on Other                     |                                       |
| Name Jasmu              | v Emery                           | 1                            |                                       |
| Representing            | ms garden                         | INN                          |                                       |
| Address 490             | 5 W Adam                          | 15 Blu                       | Rm. 18                                |
| City COS A              | NGCLOS                            | Zip Code                     | 90016                                 |
| Please see reverse of c | ard for important information and | d submit this entire card to | the presiding officer or chairperson. |

THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.

| DATE 10/2       | 0/15                          | COUNCIL<br>FILE NO. DIR  | -2015-0091              | AGENDA<br>PITEM NO                        |
|-----------------|-------------------------------|--------------------------|-------------------------|---|
| POSITION:       | Support<br>Project/Proposa    | al Oppose<br>Project/    | Proposal                | General or<br>Public Comment              |
| ODEAKED.        | Support Appeal                | Oppose                   | Appeal                  |   |
| SPEAKER:        |                               |                          |                         |   |
| Applicant       | Property Owner                | r(s) Association         | Represent<br>Check here | ative<br>if you are a paid representative |
| Appellant       | Surrounding<br>Property Owner | Organization             | Other                   |   |
| Name PA-        | TEL VIREN                     | KUMAR                    |                         |   |
| Representing    |                               |                          |                         |   |
| Address         | 50 BEACH                      | BLYD                     |                         |   |
| CitySTP         | NOTAR                         | CA                       | Zip Code                | 90680                                     |
| Please see reve | erse of card for impor        | tant information and sub | mit this entire card    | to the presiding officer or chairperson.  |

| DATE 10 12        | 0/15 FIL                       | DUNCIL<br>_E NO        |             | AGENDA<br>ITEM NO. 15-1038            |
|-------------------|--------------------------------|------------------------|-------------|---------------------------------------|
| POSITION:         | Support<br>Project/Proposal    | Oppose<br>Project/Pr   |             | General or<br>Public Comment          |
| SPEAKER:          | Support Appeal                 | Oppose A               | opeal       |                                       |
| Applicant         | Property Owner(s)              | Association            | Representat | ve<br>you are a paid representative   |
| Appellant         | Surrounding<br>Property Owners | Organization           | Other       |                                       |
| Name Octavi       | a Hernar                       | ide 2                  |             |                                       |
| Representing      | omonidad.                      |                        |             |                                       |
| Address 2537      | S. Rimpo                       | is Blud.               |             |                                       |
| City Los Ang      | eles CA                        |                        | Zip Code    | 70016                                 |
| Please see revers |                                | information and submit |             | the presiding officer or chairperson. |