CITY OF LOS ANGELES PLANNING & LAND USE MANAGEMENT COMMITTEE SPEAKER CARD							
THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.							
DATE 12-8-15 COUNCIL 15-1387 AGENDA 3							
POSITION: Support Oppose General or Project/Proposal Project/Proposal Public Comment							
SPEAKER: Support Appeal							
Applicant Property Owner(s) Association Representative Check here if you are a paid representative							
Appellant Surrounding Organization Surrounding Property Owners							
Name Karo Torossign							
Representing CD2							
Address 200 N. Spring St #435							
City LA Zip Code 90012							

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson. NOTE: THIS IS A PUBLIC DOCUMENT.

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

DATE 12/8	/ <i>15</i> F	COUNCIL TILE NO. 15-138	'7	AGENDA	#3	
POSITION:	Support Project/Proposal	Oppose Project/Pro	posal	General or Public Comm	ent	
SPEAKER:	Support Appeal	Oppose Ap	peal			
Applicant	Property Owner(s) Association	Represental Check here if	tive f you are a paid rep	resentative	
Appellant Surrounding Organization Other						
Name 9	lann Block					
Representing	hinself, nife(Nichie Bryn) and	neighbors			
Address	617 Blix S	spreet		A+1		
City	Vulley Village		Zip Code _	91602		
Please see reve		t information and submit			cer or chairperson.	

NOTE: THIS IS A PUBLIC DOCUMENT.

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

DATE	12/	8/15	COUNCIL FILE NO	15-1=	381	AGENDA	263
POSITION:		Support Project/Propos		Oppose Project/Pro		General or Public Comm	ent
SPEAKER:		Support Appea		Oppose Ap	ppeal		
	licant	Property Owne	r(s) 🗌 Assoc	iation	Representat Check here if	ive you are a paid rep	resentative
V App	ellant	Surrounding Property,Owne		ization	Other		
Name		Babette	Wilk				
Representing	g	Sel FANd M	eighbors				
Address		11565 1	lix St.				
City		VAILEY VI	llAge		Zip Code	91602	
Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.							
NOTE: THIS IS A PUBLIC DOCUMENT.							

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

DATE 12/1	0/0015	COUNCIL FILE NO	15-1387	AGENDA ITEM NO.	3
POSITION:	Support Project/Proposal	Opj Pro	pose ject/Proposal	General or Public Comm	ient
SPEAKER:	Support Appeal	Op	pose Appeal		
Applicant Applicant	Property Owner(s) Association		entative ere if you are a paid rep	resentative
Appellant	Surrounding Property Owners	Organizatio	n Other _		
Name F2A	INCIS PEREIRA				
Representing	SELF & NEIGH	BRIDDO			
Address	SEI BLUX ST				
City N. Ho	ngrod	CA	Zip Co	de alco2	
Please see rev	verse of card for importa	ant information and	submit this entire ca	rd to the presiding offi	cer or chairperson.

NOTE: THIS IS A PUBLIC DOCUMENT.

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

DATE _/2-	8-15	COUNCIL 15-	387	AGENDA
POSITION:	Support Project/Proposa	I Oppose Project/I	Proposal	General or Public Comment
SPEAKER:	Support Appeal	Oppose	Appeal	
Applicant	Property Owner	(s) Association	Represent Check here	ative
Appellant	Surrounding Property Owner	Organization s	Other	
Name	AVE P	ANP		
Representing	Applicant	- Wert Coa	rt (Houry	Patrer UC
Address				
, <u> </u>			_ Zip Code	
Please see reve	erse of card for import	ant information and subn	hit this entire card	to the presiding officer or chairperson.

NOTE: THIS IS A PUBLIC DOCUMENT.

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. Agenda Item 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: 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:

Date

Client Name: Phone #: Client Address: Street Citv State Zip

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.

	CITY OF LOS AND	GELES 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 /2, 8, 15	D PL	UM	Agenda Item	5			
I wish to speak before th	BOARD OF PU	BLIC WORKS					
I wish to speak before th		epartment, Committee or (Council				
Name: Business or Organization		titler) Against proposal) General comments			
Address:	ət						
			State	Zip			
Business phone:	Business phone: Representing:						
CHECK HERE IF YOU	ARE A PAID SPEAKER AND F	ROVIDE CLIENT INFOR	MATION BELOW:				
Client Name:			Phor	ne #:			
Client Address							
Stree	et	City	State	Zip			
Planca con roverse	of card for important information or	d submit this ontire card t	o the presiding offic	or or obairparcan			

Please see reverse of card for important information and submit this entire card to the presiding officer or chairperson.