

CDS

CITY OF LOS ANGELES PLANNING & LAND USE MANAGEMENT COMMITTEE SPEAKER CARD

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

DATE 1-10-17

COUNCIL FILE NO. 16-1368

AGENDA ITEM NO. 8

POSITION: Support Project/Proposal
 Support Appeal

Oppose Project/Proposal
 Oppose Appeal

General or Public Comment

SPEAKER:

Applicant Property Owner(s) Association

Representative
Check here if you are a paid representative

Appellant Surrounding Property Owners Organization

Other Councilmember Koretz
CDS

Name Faisal Alserri

Representing CDS

Address _____

City _____

Zip Code _____

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.

CITY OF LOS ANGELES SPEAKER CARD

#8

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
1-10-17

Agenda Item
8-16-1368-6D5

PLUM

~~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
(X) Against proposal
() General comments

Name: Rosalie Wayne

Business or Organization Affiliation: Resident

Address: 8140 Blackburn Ave LA 90048
Street City State Zip

Business phone: _____ Representing: self

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
1-10-16

Agenda Item
#8-16-1368 CDS

PLUM

~~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
(x) General comments

Name: Toby Horn

Business or Organization Affiliation: RESIDENT

Address: 146 SOUTH Fuller Ave Los Angeles CA 90036
Street City State Zip

Business phone: _____ Representing: SELF

CHECK HERE IF YOU ARE A PAID SPEAKER AND PROVIDE CLIENT INFORMATION BELOW:

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Client Address: _____
Street City State Zip

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