

33

MOTION

TO CITY CLERK FOR PLACEMENT ON NEXT
REGULAR COUNCIL AGENDA TO BE POSTED #62

JUL 31 2002

The City of Los Angeles comprises a variety of communities that make up our rich existence as a multi-cultural metropolis. The City has recognized this for many years and has periodically designated certain geographic areas with names based upon historical significance, current cultural attributes, location and other unique characteristics.

Within Council District 10 on Fairfax Avenue between Pico Boulevard and Olympic Boulevard there is a large recent influx of Ethiopian identity businesses and residents. In fact most, if not all of the businesses in this area are owned and operated by people of Ethiopian cultural identity.

Several residents, community members, and community organizations have requested the City to officially designate a specific area as "Little Ethiopia". There has been overwhelming support by the community and a commitment to work towards the positive development of the area, once designated as "Little Ethiopia."

In order to proceed with this designation, action is needed to approve it and to direct the Department of Public Works (Bureau of Engineering) and Department of Transportation to provide the necessary resources to implement the designation of "Little Ethiopia."

I THEREFORE MOVE that Fairfax Avenue Between Pico Boulevard and Olympic Boulevard in Council District 10 be designated as "Little Ethiopia."

I FURTHER MOVE that the Department of Public Works be directed to implement the designation of "Little Ethiopia."

I FURTHER MOVE that the Department of Transportation be instructed to design and install signs at appropriate locations in order to identify "Little Ethiopia."

Handwritten scribbles

PRESENTED BY: *Nate Holden*
NATE HOLDEN
Councilman, 10th District

Handwritten mark

motion
ADOPTED
AUG 07 2002
LOS ANGELES CITY COUNCIL

SECONDED BY: *James Han*
E. G. H.
Ben Cabony

ak

COUNCIL VOTE

Aug 7, 2002 11:34:20 AM, #10

ITEM NO. (33)

Voting on Item(s): 33

Roll Call

BERNSON	Absent
GALANTER	Yes
GARCETTI	Yes
GREUEL	Yes
HAHN	Yes
HOLDEN	Yes
LABONGE	Yes
MISCIKOWSKI	Yes
PACHECO	Yes
PERRY	Yes
REYES	Absent
RIDLEY-THOMAS	Yes
WEISS	Yes
ZINE	Yes
*PADILLA	Yes

Present: 13, Yes: 13 No: 0



CITY OF LOS ANGELES SPEAKER CARD

Date 7/7/02

Council File No., Agenda Item, or Case No. ITEM 33

I wish to speak before the 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? () For proposal (X) Against proposal () General comments

Name: DIM MEQUISTON

Business or Organization Affiliation: EAST HOLLYWOOD COMMUNITY ASSN

Address: 6212 YUCCA ST LA CA 90028-5223

Business phone: 323-464-6792 Representing: EHCA

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 : LOS ANGELES SPEAKER .RD

Date 8/7/02

Council File No., Agenda Item, or Case No.
33

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 proposal on the agenda? For proposal
 Against proposal
Name: BERHANU ASFAW General comments

Business or Organization Affiliation: _____

Address: 1041 So. FAIR FAX AVE. LA. CA 90019
Street City State Zip

Business phone: (323) 938-3827 Representing: MESSOB ETHIOPIAN RESTAURANT

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 : LOS ANGELES SPEAKER .RD

Date
8/7/02

Council File No., Agenda Item, or Case No.
33

I wish to speak before the L.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? For proposal
 Against proposal
Name: DR. C. ETACHEW MEKASHA General comments

Business or Organization Affiliation: Ethiopian Community

Address: 3611 Cadman Dr. LOS ANGELES CA 90027
Street City State Zip

Business phone: (323) 664-4520 Representing: Ethiopian Community

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 : LOS ANGELES SPEAKER .RD

Date
8-7-2002

Council File No., Agenda Item, or Case No.
33

I wish to speak before the 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? For proposal
 Against proposal
 General comments

Name: Meshesha Biru

Business or Organization Affiliation: Nile Travel, Lion Insurance

Address: 1047 1/2 S. Fairfax Ave Los Angeles CA 90019
Street City State Zip

Business phone: 323-931-3000 Representing: Self

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 (LOS ANGELES SPEAKER (RD

Date 8/7/2002

Council File No., Agenda Item, or Case No. 02-1641 Item#33

I wish to speak before the 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? [X] For proposal [] Against proposal [] General comments

Name: MERON AHADU

Business or Organization Affiliation: Ethiopian-American Advocacy Group

Address: 1823 S. St. Andrews Pl. #202 Los Angeles CA 90019

Business phone: 310-485-2006 Representing: Ethiopian-American Advocacy Group

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.