### Statement of Organization

**Recipient Committee**

**Statement Type**
- Initial
- Amendment
- Termination – See Part 5

**Statement of Organization**

**Recipient Committee**

**Statement Type**
- Initial
- Amendment
- Termination – See Part 5

**G Initial**

**O Not yet qualified**

**O Date qualification threshold met**

**Amendment**

**V-**

**Date qualification threshold met**

**12 02 22**

**i 1**

**1. Committee Information**

**I.D. Number**

**1456573**

**NAME OF COMMITTEE**

Citizens for Responsible Development Beverly Hills, Sponsored by UNITE HERE

Local 11

**STREET ADDRESS (NO P.O. BOX)**

464 S. Lucas Avenue, Suite 201

**CITY**

Los Angeles

**STATE**

CA

**ZIP CODE**

90017

**AREA CODE/PHONE**

(213) 481-8530

**FULL MAILING ADDRESS (IF DIFFERENT)**

777 S. Figueroa St. Ste 4050

Los Angeles, CA 90017

**E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)**

sshin@kaufmanlegalgroup.com

**CALIFORNIA FORM**

**410**

**For Official Use Only**

**2. Treasurer and Other Principal Officers**

**NAME OF TREASURER**

Susan Minato

**STREET ADDRESS (NO P.O. BOX)**

464 S. Lucas Avenue, Suite 201

**CITY**

Los Angeles

**STATE**

CA

**ZIP CODE**

90017

**AREA CODE/PHONE**

(213) 481-8530

**NAME OF ASSISTANT TREASURER, IF ANY**

Kurt Petersen

**STREET ADDRESS (NO P.O. BOX)**

464 S. Lucas Avenue, Suite 201

**CITY**

Los Angeles

**STATE**

CA

**ZIP CODE**

90017

**AREA CODE/PHONE**

(213) 481-8530

**NAME OF PRINCIPAL OFFICER(S)**

Susan Minato

**STREET ADDRESS (NO P.O. BOX)**

464 S. Lucas Avenue, Suite 201

**CITY**

Los Angeles

**STATE**

CA

**ZIP CODE**

90017

**AREA CODE/PHONE**

(213) 481-8530

**3. Verification**

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

**Executed on** 12/02/2022

**By**

**SIGNATURE OF TREASURER OR ASSISTANT TREASURER**

**EXECUTED DATE**

**SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT**

**EXECUTED DATE**

**SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT**

**EXECUTED DATE**

**SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT**

**FPPC Form 410 (August/2018)**

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov
Statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

**COMMITTEE NAME**
Citizens for Responsible Development Beverly Hills, Sponsored by UNITE HERE Local 11

**I.D. NUMBER**
1456573

**All committees must list the financial institution where the campaign bank account is located.**

<table>
<thead>
<tr>
<th>NAME OF FINANCIAL INSTITUTION</th>
<th>AREA CODE/PHONE</th>
<th>BANK ACCOUNT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>California Bank &amp; Trust</td>
<td>(213) 228-1700</td>
<td>5800690843</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>550 S. Hope St. Suite #100</td>
<td>Los Angeles</td>
<td>CA</td>
<td>90071</td>
</tr>
</tbody>
</table>

**4. Type of Committee** Complete the applicable sections.

**Controlled Committee**

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.

- List the political party with which each officeholder or candidate is affiliated or check "nonpartisan." Stating "No party preference" is acceptable

- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

**NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROponent**

<table>
<thead>
<tr>
<th>ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)</th>
<th>YEAR OF ELECTION</th>
<th>PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Nonpartisan</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Partisan</td>
</tr>
</tbody>
</table>

**Primarily Formed Committee** Primarily formed to support or oppose specific candidates or measures in a single election. List below:

**CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER) IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME.**

<table>
<thead>
<tr>
<th>CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)</th>
<th>CHECK ONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refendum Against A Resolution Passed By The City Council, A Resolution Of The City Council Approving Cheval Blanc Hotel Specific Plan: Resolution No. 22-R-12451</td>
<td>SUPPORT</td>
</tr>
<tr>
<td>City of Beverly Hills</td>
<td></td>
</tr>
<tr>
<td>Refendum Against An Ordinance Passed By The City Council, An Ordinance Of The City Council Approving A Development Agreement For The Cheval Blanc Project: Ordinance No. 22-O-2867</td>
<td>SUPPORT</td>
</tr>
<tr>
<td>City of Beverly Hills</td>
<td></td>
</tr>
</tbody>
</table>

FPPC Form 410 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
 statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

Committee NAME
Citizens for Responsible Development Beverly Hills, Sponsored by UNITE HERE Local 11

4. Type of Committee (Continued)
General Purpose Committee
Not formed to support or oppose specific candidates or measures in a single election. Check only one box:
□ CITY Committee
□ COUNTY Committee
□ STATE Committee

5. Termination Requirements
By signing the certification, the treasurer, assistant treasurer, or candidate, official, or person certifying that all of the following conditions have been met:

□ This committee has ceased to receive contributions and make expenditures;
□ This committee has no surplus funds and
□ This committee has no other obligations;
□ This committee has no surplus funds and no other obligations;
□ This committee has ceased to receive contributions and make expenditures;

This committee has ceased to receive contributions and make expenditures.

FPPC Form 410 (August/2018)
www.fPPDC.ca.gov
FPPC Advice: advice@fPPDC.ca.gov (866/777.9777)
## Section 2. Additional Information

<table>
<thead>
<tr>
<th>Name of Principal Officer:</th>
<th>Kurt Petersen</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address:</td>
<td>464 S. Lucas Avenue, Suite 201</td>
</tr>
<tr>
<td>City:</td>
<td>Los Angeles</td>
</tr>
<tr>
<td>State:</td>
<td>CA</td>
</tr>
<tr>
<td>Zip Code:</td>
<td>90017</td>
</tr>
<tr>
<td>Area Code/Phone:</td>
<td>(213) 481-8530</td>
</tr>
</tbody>
</table>

## Section 4. Primarily Formed Committee

- **Measure Name:** Referendum Against An Ordinance Passed By The City Council, An Ordinance Approving The Cheval Blanc Specific Plan Zoning And Map Amendments: Ordinance No. 22-O-2866
- **Jurisdiction:** City of Beverly Hills
- **Support or Oppose:** Support