

## Los Angeles City Ethics Commission

August 19, 2014

The Honorable City Council c/o Holly Wolcott, City Clerk 200 North Spring Street City Hall – 3rd Floor Los Angeles CA 90012

> Re: <u>Council File Number 13-1569</u> Reappointment of Jessica Postigo to the Commission on the Status of Women

> > FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Jessica Postigo was reappointed by the Mayor to the Commission on the Status of Women on July 21, 2014. The Ethics Commission received Ms. Campos' pre-confirmation financial disclosure statement on August 19, 2014. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Postigo's financial disclosure statement is enclosed.

If you have questions, please feel free to contact me at (213) 978-1960.

Sincerely,

Alexandria Latragna Ethics Program Analyst

Enclosures: CA Form 700 CEC Form 60

cc: Mayor Eric Garcetti

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

## PRE-CONFIRMATION STATEMENT OF ECONOMIC INTERESTS

LOS ANGECES OF Ceived ETHICS COMMISSION my -----

A PUBLIC DOCUMENT Please type or print in ink.	COVER PAGE	AUG 1 9 2014
NAME OF FILER (LAST)	(FIRST)	(LED DEST ( - 1
D. III	sica	REMEIVED
I. Office, Agency, or Court		
Agency Name	an a	And a second
Commission on the Status of Women		
Division, Board, Department, District, if applicable	Your Position	
	Commissioner	
► If filing for multiple positions, list below or on an attachment.		
Agency:	Position:	
. Jurisdiction of Office (Check at least one box)		
☐ State	Judge or Court Commis	sioner (Statewide Jurisdiction)
Multi-County		
City of Los Angeles		
	Utner	
. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2013, through December 31, 2013.	Leaving Office: Date (Check one)	Left//
-or- The period covered is//through December 31, 2013.		is January 1, 2013, through the date of
Assuming Office: Date assumed 12,13,2013	The period covered the date of leaving	is/, through office.
Pre-confirmation     07/21/14     (Date appointed or		
Schedule Summary		
		ng this cover page:
Schedule A-1 - Investments – schedule attached		, & Business Positions - schedule attached
Schedule A-2 - <i>Investments</i> – schedule attached Schedule B - <i>Real Property</i> – schedule attached	Schedule D - Income - Gifts	<ul> <li>schedule attached</li> <li><i>Travel Payments</i> – schedule attached</li> </ul>
-07-		- <i>Traver Payments</i> - schedule attached
None - No reportable int	erests on any schedule	
Verification	A DEAL TAL CANE	
MAILING ADDRESS STREET CON		MC20002
(Business or Agency Address Recommended - Public Document)	/ 30	AIE ZIP CODE
DAYTORE TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)	<u> </u>
Thave used all reasonable diligence in preparing this statement. I have re	viewed this statement and to the bes	t of my knowledge the information containe
herein and in any attached schedules is true and complete. I acknowled I certify under penalty of perjury under the laws of the State of Calif	and the second se	
Date Signed 6-17-14	Signature _	

FPPC Form 700 (2011/2012) FPPc Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2					
Invest	tments,	In	come,	and	Assets
	Busines				



(Ownership Interest is 10% or Greater)

	► 1. BUSINESS ENTITY OR TRUST
POST-T-GO INC	
Nare	Name
Address (Bus Check one	Address (Business Address Acceptable)
Trust, go to 2 Business Entity, complete the box, then go to 2	Check one
GENERAL DESCRIPTION OF BUSINESS ACTIVITY FILM PROD. SEIVIOS	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$0 - \$1,999      /_13         \$10,000      /_13         \$10,001 - \$100,000       ACQUIRED         DISPOSED         Over \$1,000,000	FAIR MARKET VALUE     IF APPLICABLE, LIST DATE:       \$0 - \$1,999
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Sole Proprietorship Partnership Other	Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION PRESIDENT	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	<ul> <li>2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</li> </ul>
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000	\$0 - \$499       \$10,001 - \$100,000         \$500 - \$1,000       OVER \$100,000         \$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	> 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
WARNER BROS.	INCOME OF \$10,000 OR NIGKE (Attach a separate sheet if necessary.)
CONSTANTINE PROD. SERVICES	
▲ INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT REAL PROPERTY	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000       _//13         \$10,001 - \$100,000       _//13         \$100,001 - \$1,000,000       ACQUIRED         DISPOSED	FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000      13         \$10,001 - \$100,000      13         \$100,001 - \$1,000,000       ACQUIRED
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property     are attached
Comments:	FPPC Form 700 (2011/2012) Sch. A-2

FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

## SCHEDULE B Interests in Real Property (Including Rental Income)



Name

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS		
LA CA	CITY		
FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000       /_/13         \$10,001 - \$100,000       /_/13         \$100,001 - \$1,000,000       ACQUIRED         Over \$1,000,000       NATURE OF INTEREST	FAIR MARKET VALUE       IF APPLICABLE, LIST DATE:         \$2,000 - \$10,000      /13         \$10,001 - \$1,000,000      /13         \$100,001 - \$1,000,000       ACQUIRED         Over \$1,000,000       NATURE OF INTEREST		
Ownership/Deed of Trust Easement	Ownership/Deed of Trust		
Leasehold Vrs. remaining Other	Leasehold		
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED		
S0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	□ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$10,000		
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000		
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.		
1			

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% 🔲 None%	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - <b>\$10,00</b> 0	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable

Comments: \_

FPPC Form 700 (2011/2012) Sch. B FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

## **PRE-CONFIRMATION**

	ity Ethics Commission 00 N Spring Street ity Hali – 24th Floor os Angeles, CA 90012 lail Stop 129 Et3) 978-1960 CEC Form 60 LOS ANGELES CITY ETHICS COMMISSION
comm	ed City officials, general managers and chief administrative officers of City agencies, members of City boards and nissions, and individuals nominated to positions subject to City Council approval must file this form in conjunction 1 9 2014 the state Form 700. Please refer to the attached instructions for additional information.
🔽 Original Fil	Ing Amended Filing (original filed on/20) Total PagescenceD
Name: (Last, First, Middle)	Postigo, Jessica
Agency: Com	mission on the Status of Women Position: Commissioner
Phone:	Email:
Type of State	Image: Pre-confirmation       Date of nomination: $07 / 21 / 20 14$ Assuming Office       First day in position: $/ 20 14$ Annual $/ 2013$ through December 31, 2013         Leaving Office       Last day in office: $/ 2014$
Name of res Address of r	ng interest in real property was leased from or to, co-owned by, purchased from, or sold to a restricted source. stricted source:
	owned/purchased/sold by/leased by or to:  Me  My spouse/registered domestic partner My dependent child
1	s: Leased Co-owned Purchased (date: / / 20 ) Sold (date: / / 20 ) terest: Ownership/Deed or Trust Easement Leasehold (years remaining:) Other:
	erest:       \$2,000-\$10,000       \$10,001-\$100,000       \$100,001-\$1,000,000       Over \$1,000,000         e additional real property interests to report?       No       Yes, and additional pages are attached.
Name of res Address of r Name of inv Nature of in Investment Investment Value of inv	ATMENTS         Ing investments (other than real property) were co-owned by, purchased from, or sold to a restricted source.         stricted source:         restricted source:         vestment:         vestment:         Stock       Partnership         Other         co-owned/purchased/sold by:       Me         My spouse/registered domestic partner       My dependent child         was:       Co-owned         Purchased (date:       /         yestment:       \$2,000-\$10,000         \$10,001-\$100,000       \$100,001-\$1,000,000         e additional investments to report?       No         Yes, and       additional pages are attached.

	City Ethics Commission 200 N Spring Street City Hall — 24th Floor Los Angeles, CA 90012 Mail Stop 129 (213) 978-1960	Restricted Source Financial Disclosure Statement CEC Form 60
□ 3. INCO	ME	
The follow	ing income was received from	a restricted source.
Name of re	estricted source:	
Address of	restricted source:	
Business a	ctivity of source:	
Your busin	ess position:	
Income rec	ceived by: 🗆 Me 🗆 My	spouse/registered domestic partner My dependent child
Value of in	come: 🔲 \$500—\$1,000	]\$1,001—\$10,000 □\$10,001—\$100,000 □Over \$100,000
Income wa	as: Salary/Commission	Loan repayment     Rental income     Sale of
	Other:	(e.g., car, boat, etc.)
Do you ha		? No Yes, and additional pages are attached.
4. GIFTS	5	
The follow	ing gifts cumulatively valued a	t \$50 or more were received from a restricted source.
Name of re	estricted source:	
Address of	restricted source:	
Business a	ctivity of source:	
Gifts receiv	ved by: Me My spo	ouse/registered domestic partner 🛛 🖾 My dependent child
Dates rece	ived: / 20	; / / 20 Value of gifts:
Description	n of gifts:	
Do you ha	ve additional gifts to report?	$\square$ No $\square$ Yes, and additional pages are attached.
□ 5. BOAF	RD POSITIONS	
The follow	ing position was held on the b	oard of a restricted source.
	estricted source:	<u></u>
Address of	restricted source:	
Position tit		
		use/registered domestic partner 🗌 My dependent child
Do you ha	ve additional positions to repo	rt? 🔲 No 🔲 Yes, and additional pages are attached.
6. NO I	NTERESTS	
	eportable interests in real prop uring this reporting period.	perty, investments, income, gifts, or board positions associated with restricted
Certificatio	on	
	nder penalty of perjury under he instructions for this form	
8-1	9-14	
Date		Signature