

Los Angeles City Ethics Commission

May 27, 2014

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

Re: Council File Number 14-0612

Appointment of Carole Brogdon to the Rent Adjustment Commission

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Carole Brogdon was appointed by the Mayor to the Rent Adjustment Commission on May 9, 2014. The Ethics Commission received Ms. Brogdon's pre-confirmation financial disclosure statement on May 20, 2014. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Brogdon'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

PRE-CONFIRMATION

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT.

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

LOS ANGELES CITY ETHICS COMMISSION

MAY 2.0 2014

Ple	ease type or print in ink.		
ΝAI	HE OF FILER (LAST)	(FIRST) (HISTELLED	
В	rogdon Caro	ple	
1,	Office, Agency, or Court		
	Agency Name		
	Rent Adjustment Commission		
	Division, Board, Department, District, if applicable	Your Position	
		Commissioner	
	▶ If filling for multiple positions, list below or on an attachment.		
	Agency:	Position:	
earte			
2.	Jurisdiction of Office (Check at least one box)		
	State	☐ Judge or Court Commissioner (Statewide Jurisdiction)	
	Multi-County	County of	
	Se City of Los Angeles	Other	
	The same of the same and the sa		
J.	Type of Statement (Check at least one box)	Production Della Control	
	Annual: The period covered is January 1, 2013, through December 31, 2013.	Leaving Office: Date Left/	
	The period covered is, through	O The period covered is January 1, 2013, through the date of	
	December 31, 2013.	leaving office.	
	Assuming Office: Date assumed	The period covered is/, through the date of leaving office.	
	Pre-confirmation 05/09/14 (Date appointed of	· · · · · · · · · · · · · · · · · · ·	
4,	Schedule Summary		
	Check applicable schedules or "None." ▶ To	tal number of pages including this cover page:	
	Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached	
	Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts - schedule attached	
	Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached	
	None - No reportable in	terests on any schedule	
5.	. Verification		
	MAILING ADDRESS STREET CITY (Suriness or Agency Address Recommended - Public Document)	STATE ZIP CODE	
	DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)	
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.		
	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct,		
	77 00 BAIL		
	Date Signed (month dg/, year)	Signature(File this originally signed statement with your filing official.)	
EC. (8			

PRE-CONFIRMATION



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

Elected City officials, general managers and chief administrative officers of City agencies, members of City boards and commissions, and individuals nominated to positions subject to City Council approval must file this form in conjunction with the state Form 700. Please refer to the attached instructions for additional information.

with the state Fo	Form 700. Please refer to the attached instructions for additional information.			
Original Filing 🔘	Amended Filing (original filed on//20) Total Pages:			
Name: (Last, First, Middle) Brogdon, Carole				
Agency: Rent Adjustment Commission Position: Commissioner				
Phone:	Email: Marie			
Type of Statement:	Pre-confirmation Date of nomination: 05 / 09 / 20 14 LOS ANGELES ETHICS COMMIS Assuming Office First day in position: / / 20 14 Annual / / 20 13 through December 31, 20 13 MAY 2 0 2 Leaving Office Last day in office: / / 20 14			
I had the following interests associated with restricted sources during this reporting period:				
☐ 1. REAL PROPERTY				
Name of restricted so Address of restricted Address or assessor' Interest co-owned/p	d source: "'s parcel number of real property: purchased/sold by/leased by or to: Me My spouse/registered domestic partner My dependent child eased Co-owned Purchased (date: / / 20) Sold (date: / / 20)			
	Ownership/Deed or Trust Easement Leasehold (years remaining:) Other:			
j	\$2,000—\$10,000 \$10,001—\$100,000 \$100,001—\$1,000,000 \$0 over \$1,000,000 over \$1,000,000 \$100,001 \$100,001 \$100,001 \$100,000 \$100,			
☐ 2. INVESTMENTS				
Name of restricted s Address of restricted Name of investment Nature of investmen Investment co-owne	d source: t: mt: Stock Partnership Other ed/purchased/sold by: Me My spouse/registered domestic partner My dependent child			
Value of investment	Co-owned Purchased (date: / / 20) Sold (date: / / 20) t: []\$2,000—\$10,000 []\$10,001—\$100,000 []\$100,001—\$1,000,000 conal 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

The following income was received from a restricted source. Name of restricted source: Business activity of source: Your business position: Income received by:	☐ 3. INCOME		
Address of restricted source: Business activity of source: Your business position: Income received by:	The following income was received from a restricted source.		
Address of restricted source: Business activity of source: Your business position: Income received by:	Name of restricted source:		
Your business position: Income received by:			
Income received by:	Business activity of source:		
Value of income: \$\$00_\$1,000 \$\$1,001_\$10,000 \$\$10,001_\$100,000 \$\$100,000 \$\$Income was: \$\$Salary/Commission \$\$Loan repayment \$\$Rental income \$\$Sale of \$\$\$Ce.\$, cer, bost, etc.\$\$\$\$Cother: \$\$Do you have additional income to report? \$\$\$No \$\$\$Yes, and \$\$\$additional pages are attached.\$\$\$\$ The following gifts cumulatively valued at \$\$0 or more were received from a restricted source. Name of restricted source: \$\$\$Address of restricted source: \$\$\$Business activity of source: \$\$\$\$Gifts received by: \$\$\$\$Me \$\$\$\$My spouse/registered domestic partner \$\$\$\$\$My dependent child \$\$\$\$Dates received: \$\$\$\$/\$\$/\$\$/\$\$\$/\$\$\$\$/\$\$\$\$Doscription of gifts: \$\$\$\$Doscription of gifts: \$\$\$\$\$Doscription of gifts: \$\$\$\$\$Doscription of gifts: \$\$\$\$\$Doscription of gifts to report? \$\$\$\$\$No \$\$\$\$Yes, and \$\$\$\$\$additional pages are attached.\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$Address of restricted source: \$\$\$\$\$Address of restricted source: \$\$\$\$\$\$Address of restricted source: \$\$\$\$\$\$\$\$\$\$\$Address of restricted source: \$	Your business position:		
Income was: Salary/Commission	Income received by: \square Me \square My spouse/registered domestic partner \square My dependent child		
Do you have additional income to report? No Yes, and additional pages are attached. 4. GIFTS The following gifts cumulatively valued at \$50 or more were received from a restricted source. Name of restricted source: Address of restricted source: Business activity of source: Gifts received by: My spouse/registered domestic partner My dependent child Dates received:			
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have read the instructions for this form, and the information I have provided is true and complete.	Certification		
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Date Signature	have read the instructions for this form, and the indictional Linave provider is true and complete.		
Date / Signature //	1/2/601/4		
	Date / Signature /		