

Los Angeles City Ethics Commission

June 2, 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 14-0697

Appointment of Hugo Merida to the Police Permit Review Panel

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Hugo Merida was appointed by the Mayor to the Police Permit Review Panel on May 27, 2014. The Ethics Commission received Mr. Merida's pre-confirmation financial disclosure statement today. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Mr. Merida'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 COVER PAGE

Please type or print in ink			•
NAME OF FILER (LAST)		(FIRST)	(MIDDLE)
Merida	Waldemar	aka Hugo	Merida : v
1. Office, Agency, or Court			
Agency Name			Ethios commission Tos angeles cula
Police Permit Review Panel			ETHICS COMMISSION
Division, Board, Department, District, if applicable		Your Position	JUN 2 2014
		Board Member	
▶ If filing for multiple positions, list below or on an att	achment.		RECEIVED
Agency:		Position:	
			
2. Jurisdiction of Office (Check at least one b	ox)		
☐ State		Judge or Court Commission	er (Statewide Jurisdiction)
Multi-County		County of	
⊠ City of Los Angeles		☐ Other	***************************************
3. Type of Statement (Check at least one box)		<u></u>	
Annual: The period covered is January 1, 2013, December 31, 2013.	through	Leaving Office: Date Left (Check one)	
The period covered is	, through	 The period covered is leaving office. 	January 1, 2013, through the date of
Assuming Office: Date assumed/	J	The period covered is . the date of leaving office	through
☑Pre-confirmation May 27th. 2014	(Date appointed or reappo	inted)	
4. Schedule Summary			
Check applicable schedules or "None."	▶ Total nui	mber of pages including	this cover page:2
Schedule A-1 - Investments - schedule attached	[X] S	chedule C - Income. Loans, &	Business Positions - schedule attached
Schedule A-2 - Investments - schedule attached		ichedule D - Income - Gifts -	
Schedule B - Real Property - schedule attached		ichedule E - Income - Gilts -	Travel Payments - schedule attached
□ None	-or- e - No reportable interests o	n any schedule	
5. Verification			
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommanded - Public Decument)			
DAYTIME TELEPHONE NUMBER	I S.M	NL ADDRESS (OPTIONAL)	
	·		
I have used all reasonable diligence in preparing this sherein and in any attached schedules is true and con	statement. I have reviewed nplete. I acknowledge this	inis statement and to the best of a a public document.	my knowledge the information containe
I certify under penalty of perjury under the laws of			orrest.
^			
Date Signed June 1, 2014	Signa	ture	ned stategiont with your tiling official.)

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700
Name	

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OF TRUST
THE MERIDIAN GROUP	
Name	Name
3435 WILSHIRE BLVD. SUITE 2700-18	***************************************
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
NATURE OF INVESTMENT Sole Proprietorship Partnership Other	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	≥ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ X \$1,001 - \$10,000	\$0 - \$499
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Aurich's separate sheet if decessary).	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF S10,000 OR MORE (Arthorn a populate solve) is receivedly)
ACCOUNTING AND BOOKEEPING SERVICES. INCOME TAX SERVICES	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	► 4. Investments and interests in real property held <u>by</u> the Business entity or trust
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity of City or Other Precise Location of Real Property	Description of Business Activity of City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$\insup \text{\$10,000 \frac{13}{3} \frac{13}{3} \frac{13}{3} \frac{13}{3}
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Cother	Leasehold Ys, remaining 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: 868/275-3772 www.fppc.ca.gov

SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CA	IFORN	IA FORN	700
			COMMISSION
Nan	ne	A COMPANY OF PRINCIPLE	
}			
<u> </u>			

	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
THE MERIDIAN GROUP - SELF	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
3435 WILSHIRE BLVD. SUITE 2700, L.A. CA 90010	
Business activity, if any, of source	BUSINESS ACTIVITY, IF ANY, OF SOURCE
ACCOUNTING, BOOKEEPING AND TAX PREP.	
Your Business Position	YOUR BUSINESS POSITION
OWNER-MANAGER	
BROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	S500 - \$1,000 S1,001 - \$10,000
X \$10,001 - \$100,000 OVER \$100,000	S10,001 -\$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
· · · ·	
Sale of(Real property, car, boat, etc.)	Sale of
Commission or Rental Income, ilst each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
	Caracter and the second and any and appear to any and any and any and any and any any and any any any any and any
XI Other NET PROFIT FROM BUSINESS	Cher (Dascriba)
(Describe)	(Describe)
	[]
 2. COANS RECEIVED OR OUTSTANDING DURING THE REPORTING PE 	
	lending institutions, or any indebtedness created as part of
	e lender's regular course of business on terms available to
regular course of business must be disclosed as follow	もれいみ - 日本とうのわれ しゅつかつ のわれ しゅうから とへんらいふべ れんたいか へ しゅりがっとう
	tatus. Personal loans and loans received not in a lender's
<u> </u>	ws:
NAME OF LENDER'	
NAME OF LENDER*	ws:
NAME OF LENDER*	WS: UNTEREST RATE TERM (Months/Years)
NAME OF LENDER* NONE ADDRESS (Business Address Acceptable)	WS: INTEREST RATE TERM (Months/Years) % None SECURITY FOR LOAN
NAME OF LENDER*	WS: INTEREST RATE TERM (Months/Years) % \[\bigcup \text{None} \]
NAME OF LENDER* NONE ADDRESS (Business Address Acceptable)	WS: INTEREST RATE TERM (Months/Years) % None SECURITY FOR LOAN None Personal residence
NAME OF LENDER* NONE ADDRESS (Business Address Acceptable)	WS: INTEREST RATE TERM (Months/Years) % None SECURITY FOR LOAN None Personal residence
NAME OF LENDER' NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	INTEREST RATE TERM (Months/Years) % None SECURITY FOR LOAN None Personal residence Real Property Street address
NAME OF LENDER' NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	INTEREST RATE TERM (Months/Years) % None SECURITY FOR LOAN None Personal residence Real Property Street address City
NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	INTEREST RATE TERM (Months/Years) % None SECURITY FOR LOAN None Personal residence Real Property Street address
NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$10,000	INTEREST RATE TERM (Months/Years)
NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	INTEREST RATE TERM (Months/Years)
NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$10,000	INTEREST RATE TERM (Months/Years)
NONE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$10,000	INTEREST RATE TERM (Months/Years)

PRE-CONFIRMATION

JUN 2 2014



City Ethics Commission 200 N Spring Street City Half—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	orm 700. Please refer to the attached instructions for additional information.
Original Filing	Amended Filing (original filed on//20) Total Pages:
Name: Merio (Last, First, Midde)	la, Waldemar aka Hugo Merida
Agency: Police Po	rmit Review Panel Position: Board Member
Phone:	Email: 1990 Paris 1990
Type of Statement:	☑ Pre-confirmation Date of nomination: 05 / 27 / 20 14 ☑ Assuming Office First day in position: / / 20 14 ☐ Annual / 20 13 through December 31, 20 13 ☐ Leaving Office Last day in office: / / 20 14
I had the following	nterests associated with restricted sources during this reporting period:
☐ 1. REAL PROPE	XTY
i	st in real property was leased from or to, co-owned by, purchased from, or sold to a restricted source. ource:
•	s parcel number of real property:
	urchased/sold by/leased by or to:
Nature of interest:	ased Co-owned Purchased (date: / / 20) Sold (date: / / 20) Ownership/Deed or Trust Easement Leasehold (years remaining:) Other:
Value of interest:	☐ \$2,000—\$10,000 ☐ \$10,001—\$100,000 ☐ \$100,001—\$1,000,000 ☐ Over \$1,000,000 nail real property interests to report? ☐ No ☐ Yes, and additional pages are attached.
2. INVESTMEN	rs en
Name of restricted	ments (other than real property) were co-owned by, purchased from, or sold to a restricted source. d source:
1	nt: Stock Partnership Other
Investment co-owi Investment was: Value of investmer	ed/purchased/sold by: Me My spouse/registered domestic partner My dependent child Co-owned Purchased (date: / / 20) Sold (date: / / 20) \$2,000—\$10,000 \$10,001—\$100,000 \$100,001—\$1,000,000 Over \$1,000,000 Sold (late: / / 20) Anal investments to report? No Yes, and additional pages are attached.



City Ethics Commission 200 N Spring Street City Hall — 24th Floor Los Angeles, CA 98012 Mall Stop 129 (213) 978-1960

Restricted Source Financial Disclosure Statement CEC Form 60

☑ 3. INCOME
The following income was received from a restricted source.
Name of restricted source: NONE
Address of restricted source:
Business activity of source:
Your business position:
Income received by: Me My spouse/registered domestic partner My dependent child
Value of income: □\$500—\$1,000 □\$1,001—\$10,000 □\$10,001—\$100,000 □Over \$100,000
Income was: Salary/Commission Loan repayment Rental income Sale of (e.g., car, boat, etc.)
Other:
Do you have additional income to report? INO IYes, 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:
Dates received:// 20// 20Value of gifts:
Description of gifts:
Do you have additional gifts to report?
☐ 5. BOARD POSITIONS
The following position was held on the board of a restricted source.
Name of restricted source:
Address of restricted source:
Position title:
Position held by: Me My spouse/registered domestic partner My dependent child
Do you have additional positions to report? 🔲 No 🔲 Yes, and additional pages are attached.
☑ 6. NO INTERESTS
I had no reportable interests in real property, investments, income, gifts, or board positions associated with restricted sources during this reporting period.
Certification
I declare under penalty of perjury under the laws of the City of Los Angeles and the state of California that I have read the instructions for this form, and the information Dhave provided is true and complete.
Date/ Signature/
Louis C.