



Los Angeles City Ethics Commission

June 30, 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 14-0752
Appointment of Gerlie Collado to the
Commission for Community and Family Services**

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Gerlie Collado was appointed by the Mayor to the Commission for Community and Family Services on June 6, 2014. The Ethics Commission received Ms. Collado's pre-confirmation financial disclosure statement on June 25, 2014. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Collado'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

LOS ANGELES CITY
ETHICS COMMISSION

2014
JUN 25 2014

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

RECEIVED
RECEIVED

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Collado Gerlie

1. Office, Agency, or Court

Agency Name
Commission for Community and Family Services
Division, Board, Department, District, if applicable
Your Position
Commissioner

▶ If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
 Multi-County _____
 City of Los Angeles
 Judge or Court Commissioner (Statewide Jurisdiction)
 County of _____
 Other _____

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2013, through December 31, 2013.
-or-
The period covered is _____ through December 31, 2013.
 Assuming Office: Date assumed _____
 Pre-confirmation 6/16/2014 (Date appointed or reappointed)
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2013, through the date of leaving office.
 The period covered is _____ through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

▶ Total number of pages including this cover page: _____

- Schedule A-1 - Investments - schedule attached
 Schedule A-2 - Investments - schedule attached
 Schedule B - Real Property - schedule attached
 Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule D - Income - Gifts - schedule attached
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

EMAIL 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.

Date Signed 6/20/14
(month, day, year)

Signature _____

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



1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
The James Irvine Foundation

ADDRESS (Business Address Acceptable)
805 S. Figueroa St., Suite 1320, LA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Program Associate

YOUR BUSINESS POSITION
Philanthropy

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
The Liberty Hill Foundation

ADDRESS (Business Address Acceptable)
6420 Wilshire Blvd., # 700, LA 90048

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Philanthropy

YOUR BUSINESS POSITION
Senior Manager, Training

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER	<input type="checkbox"/> Real Property _____	<small>Street address</small>
_____		_____
HIGHEST BALANCE DURING REPORTING PERIOD		<small>City</small>
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Other _____	<small>(Describe)</small>
<input type="checkbox"/> OVER \$100,000		

Comments: _____

PRE-CONFIRMATION JUN 24 2014



City Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
Mail Stop 129
(213) 978-1960

Restricted Source RECEIVED 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.

Original Filing Amended Filing (original filed on ___/___/20___) Total Pages: _____

Name: **Collado, Gerlie**
(Last, First, Middle)

Agency: Commission for Community and Family Services Position: **Commissioner**

Phone: [REDACTED] Email: [REDACTED]

Type of Statement: Pre-confirmation Date of nomination: 06 / 06 / 20¹⁴
 Assuming Office First day in position: ___ / ___ / 20¹⁴
 Annual ___ / ___ / 20¹³ through December 31, 20¹³
 Leaving Office Last day in office: ___ / ___ / 20¹⁴

I had the following interests associated with restricted sources during this reporting period:

1. REAL PROPERTY
The following interest in real property was leased from or to, co-owned by, purchased from, or sold to a restricted source.
Name of restricted source: _____
Address of restricted source: _____
Address or assessor's parcel number of real property: _____
Interest co-owned/purchased/sold by/leased by or to: Me My spouse/registered domestic partner
 My dependent child
Interest was: Leased Co-owned Purchased (date: ___ / ___ / 20___) Sold (date: ___ / ___ / 20___)
Nature of interest: 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
Do you have additional real property interests to report? No Yes, and ___ additional pages are attached.

2. INVESTMENTS
The following investments (other than real property) were co-owned by, purchased from, or sold to a restricted source.
Name of restricted source: _____
Address of restricted source: _____
Name of investment: _____
Nature of investment: Stock Partnership Other _____
Investment co-owned/purchased/sold by: Me My spouse/registered domestic partner My dependent child
Investment was: Co-owned Purchased (date: ___ / ___ / 20___) Sold (date: ___ / ___ / 20___)
Value of investment: \$2,000—\$10,000 \$10,001—\$100,000 \$100,001—\$1,000,000 Over \$1,000,000
Do you have additional investments to report? No Yes, and ___ additional pages are attached.



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Restricted Source Financial Disclosure Statement CEC Form 60

3. INCOME

The following income was received from a restricted source.

Name of restricted source: _____

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? 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: Me My spouse/registered domestic partner My dependent child

Dates received: ____/____/20____; ____/____/20____ Value of gifts: _____

Description of gifts: _____

Do you have additional gifts to report? No Yes, and _____ additional pages are attached.

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 I have provided is true and complete.

06/20/14

 Date

 Signature