



Los Angeles City Ethics Commission

September 15, 2014

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

**Re: Council File Number 14-1125  
Reappointment of Barbara Yaroslavsky to the  
Commission for Community and Family Services**

***FOR COUNCIL CONSIDERATION***

Dear Councilmembers:

Barbara Yaroslavsky was reappointed by the Mayor to the Commission for Community and Family Services on August 13, 2014. The Ethics Commission received Ms. Yaroslavsky's pre-confirmation financial disclosure statement on September 11, 2014. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Yaroslavsky'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

SEP 11 2014

CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received  
RECEIVED  
By: [Signature]

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Yaroslavsky Barbara

### 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  Judge or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of \_\_\_\_\_  
 City of Los Angeles  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 \_\_\_\_\_  
 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.  
 Pre-confirmation 08/13/14 (Date appointed or reappointed)

### 4. Schedule Summary

Check applicable schedules or "None." ► Total 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

-or-  
 None - No reportable interests on any schedule

### 5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
[Redacted]  
OFFICE TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)  
[Redacted]

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: 9/11/14  
(month, day, year)

Signature: [Redacted Signature]  
(File the originally signed statement with your filing official.)

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name Barbara Yavovansky

NAME OF BUSINESS ENTITY  
Amgen

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Drug mfg

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)  
 Partnership  
 Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
Coast Energy

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Oil

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)  
 Partnership  
 Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
CBS Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
\_\_\_\_\_

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)  
 Partnership  
 Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
facebook

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IT

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)  
 Partnership  
 Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
CISCO Sys. Inc

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
IT

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)  
 Partnership  
 Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 13  
 ACQUIRED                      DISPOSED

NAME OF BUSINESS ENTITY  
Hollyfrontier Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
\_\_\_\_\_

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  
 Other \_\_\_\_\_ (Describe)  
 Partnership  
 Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 13  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
BARBARA YAKOSLAWSKA

▶ NAME OF BUSINESS ENTITY  
IBM Corp.  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/13 ACQUIRED      \_\_\_\_/\_\_\_\_/13 DISPOSED

▶ NAME OF BUSINESS ENTITY  
Target  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/13 ACQUIRED      \_\_\_\_/\_\_\_\_/13 DISPOSED

▶ NAME OF BUSINESS ENTITY  
Sirona Dental Systems  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/13 ACQUIRED      \_\_\_\_/\_\_\_\_/13 DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/13 ACQUIRED      \_\_\_\_/\_\_\_\_/13 DISPOSED

▶ NAME OF BUSINESS ENTITY  
Staples  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
off supplies

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/13 ACQUIRED      \_\_\_\_/\_\_\_\_/13 DISPOSED

▶ NAME OF BUSINESS ENTITY  
\_\_\_\_\_  
GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$100,001 - \$1,000,000  
 \$10,001 - \$100,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Stock  Other \_\_\_\_\_ (Describe)  
 Partnership  Income Received of \$0 - \$499  
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/13 ACQUIRED      \_\_\_\_/\_\_\_\_/13 DISPOSED

Comments: \_\_\_\_\_

SEP 11 2014 **PRE-CONFIRMATION**

RECEIVED



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.

Original Filing     Amended Filing (original filed on \_\_\_/\_\_\_/20\_\_\_)    Total Pages: \_\_\_\_\_

Name: **Yaroslavsky, Barbara**  
(Last, First, Middle)

Agency: Commission for Community and Family Services    Position: Commissioner

Phone: [REDACTED]    Email: \_\_\_\_\_

Type of Statement:     Pre-confirmation    Date of nomination: 08 / 13 / 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 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.



City Ethics Commission  
 200 N Spring Street  
 City Hall — 24th Floor  
 Los Angeles, CA 90012  
 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: \_\_\_\_\_

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*

9/11/14  
 \_\_\_\_\_  
 Date

