August 25, 2023

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 15-0514</u> Reappointment of Iran Hopkins to the Commission on Disability

> > FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Iran Hopkins was reappointed by the Mayor to the Commission on Disability on August 09, 2023. The Ethics Commission received notice of the appointment from the Mayor's Office on August 10, 2023. The Ethics Commission notified Ms. Hopkins on August 15, 2023 of their filing requirement and received Ms. Hopkins' pre-confirmation financial disclosure statement on August 24, 2023. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Hopkins' financial disclosure statement is enclosed.

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

Sincerely,

Nicole Chrique Nicole Enriquez

Ethics Program Analyst

Enclosures: Form 700 Form 60

cc: Mayor Karen Bass

CALIFORNIA FORM 700	00	ECONOMIC INTE		ate Initial Filing Received Filing Official Use Only	
Please type or print in ink.	A PUBL	A PUBLIC DOCUMENT		Filed Date: 08/24/2023 05:50 PM SAN: 011300006-STH-0006	
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)		
Hopkins	Iran		С		
1. Office, Agency, or Court					
Agency Name (Do not use acronyms)					
Disability, Commission on					
Division, Board, Department, District, if	applicable	Your Position			
		Commissioner			
► If filing for multiple positions, list bel	ow or on an attachment. (Do not use	acronyms)			
A		Desition			
Agency:		Position:			
2. Jurisdiction of Office (Check	at least one box)				
State		Judge, Retired Judg (Statewide Jurisdiction		r Court Commissioner	
Multi-County		County of			
City of Los Angeles					
3. Type of Statement (Check at I					
<ul> <li>Annual: The period covered is Jan December 31, 2022.</li> <li>-or-         <ul> <li>The period covered is</li> <li>December 31, 2022.</li> </ul> </li> <li>Assuming Office: Date assumed</li> </ul>	/, through	<ul> <li>The period cover leaving office.</li> <li>-or-</li> <li>The period cover</li> </ul>	ered is/		
X Candidate: Date of Election	08/09/2023 and office sought, i	the date of leav if different than Part 1:	-		
4. Schedule Summary (require Schedules attached	_	of pages including this		2	
	ule A-1 - Investments – schedule attached       Schedule C - Income, Loans, & Business Positions – schedule attached         ule A-2 - Investments – schedule attached       Schedule D - Income – Gifts – schedule attached				
Schedule B - Real Property –		Schedule E - Income - Gif			
-or- Done - No reportable in	terests on any schedule				
5. Verification					
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pu	CITY blic Document)		STATE	ZIP CODE	
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS			
I have used all reasonable diligence in herein and in any attached schedules i			best of my knowledg	e the information contained	
I certify under penalty of perjury und	ler the laws of the State of Californi	a that the foregoing is true	e and correct.		
Date Signed 08/24/2023 (month, day, ye		gnature (Eile the origina	lly signed paper statement wi	h vour filina official )	
(monal, ddy, yt	· /	p no the original	,	,	

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

Name

Iran Hopkins

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
Akerman LLP			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Legal Services			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
Partner/Attorney			
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position Only		
\$500 - \$1,000\$1,001 - \$10,000	□ \$500 - \$1,000		
S10,001 - \$100,000 X 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 (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)		
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)		
Sale of	Sale of		
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)		
Commission or Rental Income, <i>list each source of \$10,000 or more</i>	Commission or Rental Income, <i>list each source of \$10,000 or more</i>		
(Describe)	(Describe)		
Other (Describe)	Other (Describe)		

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from a commercial lending institution, 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)
ADDRESS (Business Address Acceptable)	% 🗌 N	one
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real Property	Street address
□ \$500 - \$1,000 □ \$1,001 - \$10,000		City
\$10,001 - \$100,000	Guarantor	
OVER \$100,000	Other	(Describe)
Comments:		

Filed Date: 08/24/2023 05:51 PM SAN: 011300006-STH-0006

Ethics Commission 20 N Spring Street City Hall — 24th Floor Los Angeles, CA 90012 (213) 978-1960 ethics.lacity.org       Restricted Source Financial Disclosure Statement 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.					
Criginal Filing Amended Filing (original filed on//20) Total Pages:					
Name: (Last, First, Middle) Hopkins, Iran C					
Agency: Disability, Commission on Position: Commissioner					
Phone: Email:					
Type of Statement:       X       Pre-confirmation       Date of nomination:       08       / 09       / 2023         Assuming Office       First day in position:       / / 20         Annual       / 20       through December 31, 20         Leaving Office       Last day in office:       / 20					
<ul> <li>I had the following interests associated with restricted sources during this reporting period:</li> <li>1. REAL PROPERTY — section attached. Interests in real property leased from or to, co-owned by, purchased from, or sold to a restricted source.</li> <li>2. INVESTMENTS — section attached. Investments (other than real property) co-owned by, purchased from, or sold to a restricted source.</li> <li>3. INCOME — section attached. Income received from a restricted source.</li> </ul>					
<ul> <li>4. GIFTS — section attached. Gifts, cumulatively valued at \$50 or more, received from a restricted source.</li> <li>5. BOARD POSITIONS — section attached. Positions held on the board of a restricted source.</li> </ul>					
- Or -					
6. NO INTERESTS I had no 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.					
08/24/2023 05:51 PM					
Date Signature					