



Los Angeles City Ethics Commission

October 11, 2018

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 15-0514  
Reappointment of Iran Hopkins to the  
Commission on Disability**

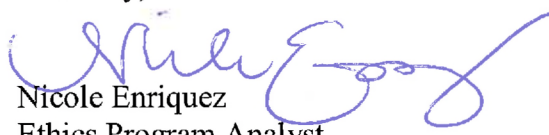
***FOR COUNCIL CONSIDERATION***

Dear Councilmembers:

Iran Hopkins was reappointed by the Mayor to the Commission on Disability on August 13, 2018. The Ethics Commission received Ms. Hopkins' pre-confirmation financial disclosure statement on October 8, 2018. 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 Enriquez  
Ethics Program Analyst

*Enclosures:*  
*Form 700*  
*Form 60*

cc: Mayor Eric Garcetti

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received  
Official Use Only

COVER PAGE

Filed Date: 10/08/2018 03:25 PM  
SAN: 011300006-STH-0006

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Hopkins Iran C

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 below or on an attachment. (Do not use acronyms)

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, 2017, through December 31, 2017.  
-or- The period covered is / / , through December 31, 2017.  
☐ Assuming Office: Date assumed / /  
☒ Candidate: Date of Election 08/13/2018 and office sought, if different than Part 1:   
☐ Leaving Office: Date Left / / (Check one)  
○ The period covered is January 1, 2017, through the date of leaving office.  
-or-  
○ The period covered is / / , through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2

Schedules attached

- ☐ 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  
(Business or Agency Address Recommended - Public Document)  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

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 10/08/2018 03:25 PM  
(month, day, year)

Signature  
(File the originally signed statement with your filing official)

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

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name Iran Hopkins

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME Akerman LLP	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) [REDACTED]	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Legal Services	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION Partner/Attorney	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)
<input type="checkbox"/> Loan repayment	<input type="checkbox"/> Loan repayment
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)	<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ (Describe)
<input type="checkbox"/> Other _____ (Describe)	<input type="checkbox"/> 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 _____ Street address	
_____	City	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Other _____ (Describe)	
<input type="checkbox"/> \$1,001 - \$10,000		
<input type="checkbox"/> \$10,001 - \$100,000		
<input type="checkbox"/> OVER \$100,000		

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



Ethics Commission  
200 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.*

☒ **Original Filing**    ☐ **Amended Filing** (original filed on \_\_\_\_/\_\_\_\_/20\_\_\_\_)

**Total Pages:** 1

**Name:** Hopkins, Iran C  
(Last, First, Middle)

**Agency:** Disability, Commission on    **Position:** Commissioner

**Phone:** [REDACTED]

**Email:** [REDACTED]

**Type of Statement:**    ☒ **Pre-confirmation**    Date of nomination: 08 / 13 / 2018  
☐ **Assuming Office**    First day in position: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_  
☐ **Annual**    \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_ through December 31, 20\_\_\_\_  
☐ **Leaving Office**    Last day in office: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_

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

- ☐ **1. REAL PROPERTY** — *section attached.*  
Interests in real property leased from or to, co-owned by, purchased from, or sold to a restricted source.
- ☐ **2. INVESTMENTS** — *section attached.*  
Investments (other than real property) co-owned by, purchased from, or sold to a restricted source.
- ☐ **3. INCOME** — *section attached.*  
Income received from a restricted source.
- ☐ **4. GIFTS** — *section attached.*  
Gifts, cumulatively valued at \$50 or more, received from a restricted source.
- ☐ **5. BOARD POSITIONS** — *section attached.*  
Positions held on the board of a restricted source.

- 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.*

10/08/2018 03:26 PM

Date

Signature