



Los Angeles City Ethics Commission

August 16, 2017

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 14-0916
Reappointment of Patricia Williams to the
Disabled Access Appeals Commission**

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Patricia Williams was reappointed by the Mayor to the Disabled Access Appeals Commission on July 25, 2017. The Ethics Commission received Ms. Williams's pre-confirmation financial disclosure statement on August 14, 2017. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Ms. Williams's financial disclosure statement is enclosed.

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

Sincerely,

Nicole Enriquez
Ethics Program Assistant

Enclosures:

Form 700

Form 60

cc: Mayor Eric Garcetti

COVER PAGE

Filed Date: 08/14/2017 06:12 PM
SAN: 011300006-STH-0006

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Williams Patricia

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Building and Safety, Department of
Division, Board, Department, District, if applicable Your Position
Commissioner, Disabled Access Appeals Commission

► 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, 2016, through December 31, 2016.
-or- The period covered is / / , through December 31, 2016.
☐ Assuming Office: Date assumed / /
☒ Candidate: Election year 07/25/2017 and office sought, if different than Part 1:
☐ Leaving Office: Date Left / /
(Check one)
☐ The period covered is January 1, 2016, 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: 1

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)
Los Angeles CA 90012
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 08/14/2017 06:12 PM Signature Electronic Submission
(month, day, year) (File the originally signed statement with your filing official)



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: Williams, Patricia
(Last, First, Middle)

Agency: Building and Safety, Department of **Position:** Commissioner, Disabled Access Appeals Commission

Phone:

Email:

Type of Statement: ☒ **Pre-confirmation** Date of nomination: 07 / 25 / 2017
 ☐ **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.

08/14/2017 06:14 PM

Electronic Submission

Date

Signature