CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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KORETZ
Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Koetz	Paul	

1. Office, Agency, or Court

Agency Name
City of Los Angeles

Division, Board, Department, District, if applicable
Council District 5

Your Position
Councilmember

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

Agency: _____ Position: _____

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

☐ State
☐ Multi-County _____
☒ City of Los Angeles
☐ Judge (Statewide Jurisdiction)
☐ County of _____
☐ Other _____

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

☒ **Annual:** The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is ____/____/____, through December 31, 2010.

☐ **Assuming Office:** Date ____/____/____

☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

☐ **Leaving Office:** Date Left ____/____/____
(Check one)

○ The period covered is January 1, 2010, 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:** 5

☐ **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*

herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed 1-31-11
(month, day, year)

Signatur

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name: Paul Koretz

SCHEDULE B
Interests in Real Property
(Including Rental Income)

▶ STREET ADDRESS OR PRECISE LOCATION
9015 Cynthia Street, #1

CITY
West Hollywood, CA 90069

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
- ☒ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ Yrs. remaining
- ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☒ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
Brett and Michelle Levisohn

▶ STREET ADDRESS OR PRECISE LOCATION

CITY

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

IF APPLICABLE, LIST DATE:
___/___/10 ACQUIRED ___/___/10 DISPOSED

NATURE OF INTEREST
- ☐ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ Yrs. remaining
- ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

* You are not required to report loans from commercial lending institutions 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*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000
- ☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000
- ☐ Guarantor, if applicable

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Comments: _____

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Paul Koretz

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: Kaiser Permanente

ADDRESS *(Business Address Acceptable)*: 4841 Hollywood Blvd., LA, CA 90027

BUSINESS ACTIVITY, IF ANY, OF SOURCE: Hospital/Health Plan

YOUR BUSINESS POSITION: Gov't & Community Relations Manager

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 _____ *(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

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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 _____ *(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*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

INTEREST RATE: _____% ☐ None

TERM (Months/Years): _____

SECURITY FOR LOAN
- ☐ None
- ☐ Personal residence
- ☐ Real Property _____ *Street address*
- _____ *City*
- ☐ Guarantor _____
- ☐ Other _____ *(Describe)*

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Comments: _____

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name: Paul Koretz

SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Southland Regional Association of Realtors	7232 Balboa Blvd., LA, CA 91406	Realtor Association	01/16/10	$100	Installation Dinner
AEG	800 W. Olympic Blvd., Suite 305, LA, CA 90015	Sports and Entertainment Presenter	06/21/10	$59	Laker's VIP Breakfast
Directors Guild of America	7920 West Sunset Blvd., LA, CA 90046	Directors/Production Association	01/30/10	$175	Awards Dinner
Saban Free Clinic	8405 Beverly Blvd., LA, CA 90048	Health Clinic	07/17/10	$225	Fundraiser Ticket
Los Angeles Area Chamber of Commerce	350 S. Bixel Street, LA, CA 90017	Business Association	02/04/10	$100	Inaugural Dinner Tick.
Hillcrest Country Club	10000 West Pico Blvd., LA, CA 90064	Country Club	08/28/10	$250	Anniversary Party Tick

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Name: Paul Koretz

SCHEDULE D
Income – Gifts

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Leo Baeck Temple	1300 North Sepulveda Blvd., LA, CA 90077	Synagogue	09/09/10	$63	Rosh Hashanah Ticket

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Caruso Affiliated	101 The Grove Drive, LA, CA 90036	Real Estate & Business Firm	11/21/10	$90	Grove Christmas Party

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Temple Beth Am	1039 S. La Cienega Blvd., LA, CA 90035	Synagogue	09/18/10	$75	Yom Kippur Ticket

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Children's Hospital Los Angeles	4650 Sunset Blvd., LA, CA 90027	Hospital	11/10/10	$100	LAEDC Awards Tick.

NAME OF SOURCE	ADDRESS (Business Address Acceptable)	BUSINESS ACTIVITY, IF ANY, OF SOURCE	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)

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CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

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Date Received
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2011 MAR 25 PM 3:17

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Koretz	Paul	

RECVD BY

1. Office, Agency, or Court

Agency Name
City of Los Angeles

Division, Board, Department, District, if applicable: Council District 5

Your Position: Councilmember

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

Agency: _____ Position: _____

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☐ Multi-County _____
☒ City of Los Angeles
☐ Judge (Statewide Jurisdiction)
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-or-

☐ **None** - *No reportable interests on any schedule*

5. Verification

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

(d)(5)

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 (d)(5) **Signature** (d)(5)
(Sign in ink and check with your filing official.)

3/24/11