

Please type or print in ink.

2013 MAR 29 PM 2:11

NAME OF FILER (LAST) MORRIS (FIRST) DOROTHY (MIDDLE) ELAINE

1. Office, Agency, or Court

Agency Name

CITY OF ANGELS

Division, Board, Department, District, if applicable

MAYOR

Your Position

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

Agency: Position:

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

- State, Multi-County, City of ANGELS, Judge or Court Commissioner, County of, Other

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

- Annual, Leaving Office, Assuming Office, Candidate

4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 2

- Schedule A-1, A-2, B, C, D, E

None - No reportable interests on any schedule

5. Verification



I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2-23-13 (month, day, year)

**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 <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <u>DOROTHY E. MORRIS</u>

▶ NAME OF BUSINESS ENTITY
METLIFE INC.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
STOCK INSURANCE Co.

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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Comments: _____