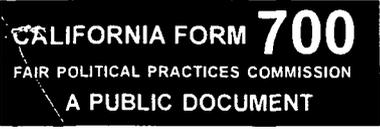


AN2013



STATEMENT OF ECONOMIC INTERESTS

Date Received RECEIVED

RECEIVED FAIR POLITICAL PRACTICES COVER PAGE



JAN 21 2014

Please type or print in ink.

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

2014 MAR 24 PM 2:14

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Angels

MAYOR

Division, Board, Department, District, if applicable

Your Position

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

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

- Annual: The period covered is January 1, 2013, through December 31, 2013. Leaving Office: Date Left, The period covered is January 1, 2013, through the date of leaving office. Assuming Office: Date assumed, The period covered is through the date of leaving office. Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 2

- 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, None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE



Date Signed 1-20-14 (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.

Name
DOROTHY E. MORRIS

▶ NAME OF BUSINESS ENTITY
METLIFE INC.

GENERAL DESCRIPTION OF THIS BUSINESS
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:
 _____ / _____ / 13 _____ / _____ / 13
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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)
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Comments: _____