

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

Date Initial Filing Received
Filing Official Use Only
**LOS ANGELES CITY
ETHICS COMMISSION**

MAR 26 2021

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Moore Michel R

RECEIVED

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Los Angeles Police Department
Division, Board, Department, District, if applicable Your Position
Chief of Police

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: Los Angeles County Regional Crime Lab Authority Position: Chair

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

State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
 Multi-County County of Los Angeles
 City of Los Angeles Other

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

Annual: The period covered is January 1, 2020, through December 31, 2020.
-or- The period covered is _____, through December 31, 2020.
 Assuming Office: Date assumed _____
 Candidate: Date of Election _____ and office sought, if different than Part 1: _____
 Leaving Office: Date Left _____ (Check one circle.)
 The period covered is January 1, 2020, 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: _____

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 (Business or Agency Address Recommended - Public Document)	STREET	CITY	STATE	ZIP CODE
100 W. 1st Street Room 1072		Los Angeles	CA	90012
DAYTIME TELEPHONE NUMBER	EMAIL ADDRESS			
(213) 486-0150	michel.moore@lapd.online			

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 3-26-21 Signature [Signature]
(month, day, year) (File the originally signed paper statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Michel Moore

NAME OF BUSINESS ENTITY
Altria Group

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Products

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Emerson Electric Co.

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Cisco Systems Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Technology

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Discover Financial Services

GENERAL DESCRIPTION OF THIS BUSINESS
Financial Services

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Home Depot

GENERAL DESCRIPTION OF THIS BUSINESS
Retail Sales

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Intel Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

Comments: _____

Print

Clear

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Michel Moore

▶ NAME OF BUSINESS ENTITY
Pfizer Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
____/____/20 ____/____/20
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Kraft Heinz Co.

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Food Producer

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:
____/____/20 ____/____/20
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Phillip Morris Inc.

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
____/____/20 ____/____/20
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Mondelez International Inc

GENERAL DESCRIPTION OF THIS BUSINESS
Consumer Food Producer

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:
____/____/20 ____/____/20
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Royal Dutch Shell

GENERAL DESCRIPTION OF THIS BUSINESS
Energy

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:
____/____/20 ____/____/20
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Western Digital

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
____/____/20 ____/____/20
ACQUIRED DISPOSED

Comments: _____

Print

Clear

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

Name

Michel Moore

NAME OF BUSINESS ENTITY
Texas Instrument

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Linde PLC

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturing

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:
 _____/_____/20 _____/_____/20
 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)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/20 _____/_____/20
 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)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/20 _____/_____/20
 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)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/20 _____/_____/20
 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)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/20 _____/_____/20
 ACQUIRED DISPOSED

Comments:

Print

Clear

SCHEDULE D
Income – Gifts

Name
Michel Moore

▶ NAME OF SOURCE (Not an Acronym)
Kelly C. C. Lin

ADDRESS (Business Address Acceptable)
3731 Wilshire Blvd, Ste 750, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Taipei Economic and Cultural Office Los Angeles

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 06 / 20</u>	<u>\$ 39.95</u>	<u>Chocolates</u>
<u>01 / 06 / 20</u>	<u>\$ 19.99</u>	<u>Chocolates</u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Geri Ostil

ADDRESS (Business Address Acceptable)
100 Red Cross Circle, Pomona

BUSINESS ACTIVITY, IF ANY, OF SOURCE
American Red Cross

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 15 / 20</u>	<u>\$ 2.65</u>	<u>Bag</u>
<u>01 / 15 / 20</u>	<u>\$ 39.80</u>	<u>4 Shirts</u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Erik Hildebrandt

ADDRESS (Business Address Acceptable)
4100 E. Donald Douglas Dr., Long Beach

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Jet Blue

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 23 / 20</u>	<u>\$ 154.50</u>	<u>Metal Model Jet</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Special Needz Coffee

ADDRESS (Business Address Acceptable)
2930 Inland Empire Blvd. Ontario

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Special Needz Coffee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 03 / 20</u>	<u>\$ 19.99</u>	<u>Coffee and Cup</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Major Cities Chiefs Association

ADDRESS (Business Address Acceptable)
P.O. Box 8717, Salt Lake City, UT

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>01 / 08 / 20</u>	<u>\$ 69.70</u>	<u>Belt Buckle</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)
Eric Mollinedo

ADDRESS (Business Address Acceptable)
1130 S. Vermont, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>02 / 06 / 20</u>	<u>\$ 49.90</u>	<u>Cookies</u>
<u> / / </u>	<u>\$</u>	<u></u>
<u> / / </u>	<u>\$</u>	<u></u>

Comments: _____

SCHEDULE D
Income – Gifts

Name

Michel Moore

▶ NAME OF SOURCE *(Not an Acronym)*
Rick Smith

ADDRESS *(Business Address Acceptable)*
17800 N. 85th St, Scottsdale, AZ

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Axon

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 18 / 20	\$ 32.50	Good to Great - Book
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Jennifer

ADDRESS *(Business Address Acceptable)*
www.lacrimestoppers.org

BUSINESS ACTIVITY, IF ANY, OF SOURCE
LA Crime Stoppers

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 21 / 20	\$ 53.00	Cookies
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Nuance Dragon Law Enforcement

ADDRESS *(Business Address Acceptable)*
1 Wayside Rd, Burlington, MA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 02 / 20	\$ 10.00	Starbucks Gift Card
03 / 02 / 20	\$ 29.99	Yeti Mug
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Toronto Police Service

ADDRESS *(Business Address Acceptable)*
40 College Street, Toronto, ON

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 02 / 20	\$ 23.28	Pen, Keychains
03 / 02 / 20	\$ 13.49	Golf Balls
03 / 02 / 20	\$ 6.99	Challenge Coin
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Toronto Police Service

ADDRESS *(Business Address Acceptable)*
40 College Street, Toronto, ON

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 02 / 20	\$ 8.50	Toronto PD Patch
03 / 02 / 20	\$ 2.59	Coffee Cup
03 / 02 / 20	\$ 1.94	Chapstick, Tape Measu
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE *(Not an Acronym)*
Toronto Police Service

ADDRESS *(Business Address Acceptable)*
40 College Street, Toronto, ON

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 02 / 20	\$ 6.00	Baseball Hat
03 / 02 / 20	\$ 1.87	Lanyard
___ / ___ / ___	\$ _____	_____

Comments: _____

Print

Clear

SCHEDULE D
Income – Gifts

Name
Michel Moore

▶ NAME OF SOURCE (Not an Acronym)
T. T. Williams Jr.

ADDRESS (Business Address Acceptable)
445 S. Figueroa St, Ste 2950, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 23 / 20	\$ 19.95	Book - A Deep Dive
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Consulate General of UAE Los Angeles

ADDRESS (Business Address Acceptable)
1999 Ave of the Stars Ste 1250, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 05 / 20	\$ 27.99	Khalas Dates
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Lola Brogin

ADDRESS (Business Address Acceptable)
rememberlola@yahoo.com

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07 / 28 / 20	\$ 70.97	fruit cake, banana cake
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Serena C. H. Yu

ADDRESS (Business Address Acceptable)
3731 Wilshire Blvd. Ste 700, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Taipei Economic and Cultural Office Los Angeles

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 24 / 20	\$ 57.99	Whiskey
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Rod Guy

ADDRESS (Business Address Acceptable)
221 River St. Hoboken, NJ

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Nice Systems

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 27 / 20	\$ 34.99	Nuts
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Aaron Donald

ADDRESS (Business Address Acceptable)
29899 Agoura Rd. Agoura Hills, Ca

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Los Angeles Rams

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 31 / 20	\$ 49.99	Sweatshirt
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

Name
Michel Moore

▶ NAME OF SOURCE (Not an Acronym)
Lenny Sands

ADDRESS (Business Address Acceptable)
321 St. Pierre Rd, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 15 / 20	\$ 118.89	Power Washer
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Louis Hwang

ADDRESS (Business Address Acceptable)
3731 Wilshire Blvd, Ste 700, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Taipei Economic and Cultural Office Los Angeles

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 22 / 20	\$ 20.00	Mooncakes
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Jimmy Wu

ADDRESS (Business Address Acceptable)
506 S. Grand Ave, Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Biltmore Hotel

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 29 / 20	\$ 39.00	Mooncakes
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Dean Spano

ADDRESS (Business Address Acceptable)
3333 Susan Ct, Costa Mesa, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
HOAG Performance Center

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 27 / 20	\$ 99.00	Chargers Jersey
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Lorriana Garcia

ADDRESS (Business Address Acceptable)
126 N. St. Louis St. Los Angeles, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Hollenbeck PAL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 13 / 20	\$ 47.22	Wine, Tequila
11 / 13 / 20	\$ 40.00	Wine Bottle Opener
11 / 13 / 20	\$ 27.99	Box of Chocolates

▶ NAME OF SOURCE (Not an Acronym)
Andrew Crowell

ADDRESS (Business Address Acceptable)
YMCA Metropolitan Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 07 / 20	\$ 28.99	Bottle of Champagne
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D
Income – Gifts

Name

Michel Moore

▶ NAME OF SOURCE (Not an Acronym)
Kyle Flanders

ADDRESS (Business Address Acceptable)
7 Corporate Dr. Essex Junction, VT

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Revision Military

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 10 / 20	\$ 33.99	Vision Wear Glasses
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
LAPFCU

ADDRESS (Business Address Acceptable)
1880 Academy Dr. Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 14 / 20	\$ 24.50	See's Candy
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
KABC News

ADDRESS (Business Address Acceptable)
500 Circle Seven Dr. Glendale

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 14 / 20	\$ 49.99	Box of Gift Wrap
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Mike Fadden

ADDRESS (Business Address Acceptable)
1340 Russell Cave Rd. Lexington, KY

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Galls

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 15 / 20	\$ 21.25	Socks, Holiday Stocking
12 / 15 / 20	\$ 74.83	Pliers, Flashlight, Pen
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Kelly C. C. Lin

ADDRESS (Business Address Acceptable)
3731 Wilshire Blvd, Ste 750 Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Taipei Economic and Cultural Office Los Angeles

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 17 / 20	\$ 9.99	Chocolates
12 / 17 / 20	\$ 24.99	Tea
12 / 17 / 20	\$ 59.99	Bottle of Whiskey

▶ NAME OF SOURCE (Not an Acronym)
Rick Caruso

ADDRESS (Business Address Acceptable)
189 The Grove Dr. Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 21 / 20	\$ 99.99	Wine Gift Basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: Check to Rick Caruso for \$68.92, dated 3-22-21.

Print

Clear

SCHEDULE D Income – Gifts

Name
Michel Moore

▶ NAME OF SOURCE *(Not an Acronym)*
John Breakey

ADDRESS *(Business Address Acceptable)*
11250 S. Washtenaw, Chicago, IL

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Chicago Police Department

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 21 / 20	\$ 51.38	Golf balls and towel
12 / 21 / 20	\$ 8.83	Cup and lapel pins
12 / 21 / 20	\$ 18.84	

▶ NAME OF SOURCE *(Not an Acronym)*
Cecil Rhambo

ADDRESS *(Business Address Acceptable)*
6320 96th St. Los Angeles

BUSINESS ACTIVITY, IF ANY, OF SOURCE
LAWA Police Department

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 22 / 20	\$ 2.28	Pen
12 / 22 / 20	\$ 6.99	Challenge Coin
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

Name
Michel Moore

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. Per Government Code Section 89506, these payments may not be subject to the gift limit. However, they may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE *(Not an Acronym)*
Los Angeles Police Federal Credit Union

ADDRESS *(Business Address Acceptable)*
P.O. Box 10188

CITY AND STATE
Van Nuys, CA

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Credit Union

DATE(S): ___/___/___ - ___/___/___ AMT: \$ 1400.00
(If gift)

▶ MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description _____
Board Member

▶ If Gift, Provide Travel Destination _____
San Diego / Santa Barbara

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ___/___/___ - ___/___/___ AMT: \$ _____
(If gift)

▶ MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ If Gift, Provide Travel Destination _____

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ___/___/___ - ___/___/___ AMT: \$ _____
(If gift)

▶ MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ If Gift, Provide Travel Destination _____

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

CITY AND STATE

501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE(S): ___/___/___ - ___/___/___ AMT: \$ _____
(If gift)

▶ MUST CHECK ONE: Gift -or- Income

Made a Speech/Participated in a Panel

Other - Provide Description _____

▶ If Gift, Provide Travel Destination _____

Comments: _____