



Los Angeles City Ethics Commission

June 21, 2018

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 18-0514
Appointment of Michel Moore as the
Chief of Police, Los Angeles Police Department**

FOR COUNCIL CONSIDERATION

Dear Councilmembers:

Michel Moore was appointed by the Mayor as the Chief of Police, Los Angeles Police Department on June 4, 2018. The Ethics Commission received Mr. Moore's pre-confirmation financial disclosure statement on June 16, 2018. In compliance with Los Angeles Municipal Code § 49.5.10, a copy of Mr. Moore'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: 06/16/2018 01:50 PM
SAN: 011300006-STH-0006

Please type or print in ink.

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

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Police
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: _____ 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, 2017, through December 31, 2017.
-or-
The period covered is ____/____/____, through December 31, 2017.
- Assuming Office: Date assumed ____/____/____
- Leaving Office: Date Left ____/____/____ (Check one)
 The period covered is January 1, 2017, through the date of leaving office.
- The period covered is ____/____/____, through the date of leaving office.
- Candidate: Date of Election 06/04/2018 and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 4

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)
[Redacted]
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
[Redacted]

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 06/16/2018 01:50 PM Signature [Redacted]
(month, day, year) (File the originally signed statement with your filing official)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Michel Moore

▶ NAME OF BUSINESS ENTITY
General Electric

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Pfizer Inc

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____ ____/____/_____
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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Philip Morris Incorp

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Intel Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Praxair Inc

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Michel Moore

▶ NAME OF BUSINESS ENTITY
Royal Dutch Shell

GENERAL DESCRIPTION OF THIS BUSINESS
Petro

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Altria Group

GENERAL DESCRIPTION OF THIS BUSINESS
Captail and 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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Texas Instrument

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Cisco Sys 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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Western Digital

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacturer

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Discover Fincl Svcs

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:
_____/_____/_____ ____/____/_____
ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Michel Moore

▶ NAME OF BUSINESS ENTITY
Emerson Electric Co

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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:
_____/_____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Praxair Inc

GENERAL DESCRIPTION OF THIS BUSINESS
Manufacture

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

▶ NAME OF BUSINESS ENTITY
Wells Fargo & Co New

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:
_____/_____/_____
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Mondelez Intl nc Com

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

Comments: _____



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: 2

Name: Moore, Michel R
(Last, First, Middle)

Agency: Police

Position: Chief of Police

Phone:

Email:

Type of Statement: **Pre-confirmation** Date of nomination: 06 / 04 / 2018
 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.

06/16/2018 01:56 PM

Date

Signature



Ethics Commission
200 N Spring Street
City Hall — 24th Floor
Los Angeles, CA 90012
(213) 978-1960
ethics.lacity.org

Form 60

Section 5 -- Board Positions

Name: Moore, Michel R
(Last, First, Middle)

The following positions were held on the board of a restricted source.

Name of restricted source:
Los Angeles Police Federal Credit Union

Address of restricted source:
[REDACTED]

Position Title:
Director

Position held by:
 Me My spouse/registered domestic partner
 My dependent child

Name of restricted source:
Los Angeles Police Memorial Foundation

Address of restricted source:
[REDACTED]

Position Title:
Director

Position held by:
 Me My spouse/registered domestic partner
 My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:
 Me My spouse/registered domestic partner
 My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:
 Me My spouse/registered domestic partner
 My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:
 Me My spouse/registered domestic partner
 My dependent child

Name of restricted source:

Address of restricted source:

Position Title:

Position held by:
 Me My spouse/registered domestic partner
 My dependent child