

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

3/31/2015 3:23:15 PM

Please type or print in ink. SAN: 043000025-LAC-0025

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)			
Ratliff		Monica				
1. Office, Ag	jency, or Court					
Agency Name						
Los Ange	eles Unified School District					
Division, Boar	livision, Board, Department, District, if applicable  Your Position					
	Board of Education Member					
▶ If filing for	multiple positions, list below or on an attachme	nt.				
Agency:		Position:				
2. Jurisdicti	ion of Office (Check at least one box)					
State	(2.1.2.1)	☐ Judge or Court Commissioner (	(Statewide Jurisdiction)			
	nty	Los Angolos	·			
_		_ ,				
		Unier				
3. Type of S	Statement (Check at least one box)					
🗵 Annual:	The period covered is January 1, 2014, throug					
-or-	Decmber 31, 2014.	(Check one)	4 0044 !! ! !			
	The period covered is, to December 31, 2014.	hrough One period covered is Jan leaving office.	uary 1, 2014, through the date of			
Assumir	ng Office: Date assumed	<ul> <li>The period covered is</li> <li>of leaving office.</li> </ul>	, through the date			
Candida	te: Election Year and	d office sought, if different than Part 1:				
4. Schedule	Summary					
	cable schedules or "None."	► Total number of pages including this	cover page: 2			
☐ Schedul	e A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Busin	uess Positions – schedule attached			
=	e A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedu				
Schedul	e B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel				
-or-						
None - No reportable interests on any schedule						
5. Verification	on					
MA L NG ADDRI	ESS STREET ency Address Recommended - Public Document)	CITY ST	TATE ZIP CODE			
Business of Age	Entry Address Recommended - Fablic Document)					
DAYTIME TELE	PHONE NUMBER	E-MAIL ADDRESS				
		monica.ratliff@lausd.net				
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information conherein 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.						
	3/31/2015					
Date Signed	(month, day, year)	Signature	atement with your filing official.)			

## SCHEDULE D Income - Gifts

Monica Ratliff

▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURC	E (Not an Acronym)	
Ford Roosevelt, President and CEO of Project GRAD			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
10200 Sepulveda Bldv., Suite 255, Mission Hills, CA 91345			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
Working to raise college graduation rates.			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
Project GRAD hoodie and tote bag			
01/22/2014 \$ 50		\$	
\$		\$	
\$		\$	
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURC	E (Not an Acronym)	
, , , , , , , , , , , , , , , , , , , ,		( ,	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
, 122 ( 123 ( 123 ) 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 ) ( 133 )	ABBINESS (Business Address Acceptable)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVI	TY IF ANY OF SO	LIRCE
DOGINE CONTINUE, II MINI, OF GOOKGE	Boomeso Norm	11, 11 71111, 01 00	ONOL
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
DATE (IIIII/dd/yy) VALOE DESCRIPTION OF GIFT(3)	DATE (IIIII/dd/yy)	VALUE	DESCRIPTION OF GIFT(3)
\$		\$	
		¥	
\$		\$	
\$		\$	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURC	E (Not an Acronym)	<u> </u>
With the course (not all reliably)	TO THE ST COURS	= (Not all Notollylli)	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)		
ADDITEOG (Dasiness Address Acceptante)	NEENEOO (Basino)	33 Address Accepta	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVI	TV IE ANV OE SO	LIDCE
BOSINESS ACTIVITY, II ANY, OF SOUNCE	BOOMESO ACTIVI	11, 11 AIVI, OI 30	UNGE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/w/)	VALUE	DESCRIPTION OF GIFT(S)
DATE (IIIII/dd/yy) VALOE DESCRIPTION OF GIFT(3)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
\$		\$	
		Ψ	
\$		\$	
		•	
\$		\$	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
Comments:			