

STATEMENT OF ECONOMIC INTERESTS

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COVER PAGE  
FAIR POLITICAL PRACTICES COMMISSION

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2011 FEB 23 AM 11:21  
SANTA MONICA, CALIF.

Please type or print in ink.

NAME OF FILER (LAST) BLOOM (FIRST) RICHARD  
2011 MAR -2 PM 2:54 (MIDDLE)

TP

Office, Agency, or Court

Agency Name  
Santa Monica City Council  
Division, Board, Department, District, if applicable  
Your Position  
Councilmember, Mayor

► 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 Santa Monica
- Judge (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2010, through December 31, 2010.  
-or-  
The period covered is \_\_\_\_\_, through December 31, 2010.
- Assuming Office: Date \_\_\_\_\_
- Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_
- Leaving Office: Date Left \_\_\_\_\_ (Check one)
  - The period covered is January 1, 2010, through the date of leaving office.
  - The period covered is \_\_\_\_\_, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: \_\_\_\_\_

- 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

-or-

None - No reportable interests on any schedule

5 [Redacted]

herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed 2/23/11  
(month, day, year)

Signature

[Redacted Signature]



**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
RICHARD BLOOM

► STREET ADDRESS OR PRECISE LOCATION  
2440 Cloverfield Blvd.

CITY  
Santa Monica, CA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                                      DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_       \_\_\_\_\_  
 Yrs. remaining                                      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 \_\_\_\_\_  
 \_\_\_\_\_

► STREET ADDRESS OR PRECISE LOCATION  
\_\_\_\_\_

CITY  
\_\_\_\_\_

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10      \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                                      DISPOSED

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_       \_\_\_\_\_  
 Yrs. remaining                                      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 \_\_\_\_\_  
 \_\_\_\_\_

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE                                      TERM (Months/Years)  
 \_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE                                      TERM (Months/Years)  
 \_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_



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

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small> Name <p align="center">RICHARD BLOOM</p>
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- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.**

▶ NAME OF SOURCE  
Energy Coalition  
 ADDRESS (Business Address Acceptable)  
15615 Alton Parkway, Suite 245  
 CITY AND STATE  
Irvine, CA 92618  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Community energy partnerships  
 DATE(S): 3 / 21 / 10 - 3 / 23 / 10 AMT: \$ 953.40  
(If applicable)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
Airfare, lodging & meals for conference,  
 DESCRIPTION: Napa, CA

▶ NAME OF SOURCE  
Energy Coalition  
 ADDRESS (Business Address Acceptable)  
15615 Alton Parkway, Suite 245  
 CITY AND STATE  
Irvine, CA 92618  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Community energy partnerships  
 DATE(S): 10 / 28 / 10 - 10 / 30 / 10 AMT: \$ 607.18  
(If applicable)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
Airfare, lodging & meals for conference,  
 DESCRIPTION: Palm Desert, CA

▶ NAME OF SOURCE  
Energy Coalition  
 ADDRESS (Business Address Acceptable)  
15615 Alton Parkway, Suite 245  
 CITY AND STATE  
Irvine, CA 92618  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
Community energy partnerships  
 DATE(S): 7 / 31 / 10 - 8 / 5 / 10 AMT: \$ 3,078  
(If applicable)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
Airfare, lodging & meals for conference,  
 DESCRIPTION: Berlin, Germany

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 CITY AND STATE  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  501 (c)(3)  
 \_\_\_\_\_  
 DATE(S): \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_ AMT: \$ \_\_\_\_\_  
(If applicable)  
 TYPE OF PAYMENT: (must check one)  Gift  Income  
 DESCRIPTION: \_\_\_\_\_

Comments: \_\_\_\_\_