

COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST) Bloom (FIRST) Richard (MIDDLE) 2013 MAR -1 PM 1:40

1. Office, Agency, or Court

Agency Name Assembly
Division, Board, Department, District, if applicable District 50
Your Position Assemblymember

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
Judge or Court Commissioner (Statewide Jurisdiction)
County of
Other

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

- Annual: The period covered is January 1, 2012, through December 31, 2012.
Assuming Office: Date assumed
Candidate: Election year and office sought, if different than Part 1:
Leaving Office: Date Left
The period covered is January 1, 2012, through the date of leaving office.
The period covered is through the date of leaving office.

4. Schedule Summary

- 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

Large greyed-out area for verification and signature.

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

Date Signed 2/26/13 (month, day, year)

Signature

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Richard Bloom

NAME OF BUSINESS ENTITY
Activision, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

Comments:

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

Name
 Richard Bloom

1. BUSINESS ENTITY OR TRUST

Name
 Law & Consulting Offices of Richard Bloom

Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
 Professional law practice

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 _____/_____/12 _____/_____/12
 \$2,000 - \$10,000 _____/_____/12 _____/_____/12
 \$10,001 - \$100,000 _____/_____/12 _____/_____/12
 \$100,001 - \$1,000,000 _____/_____/12 _____/_____/12
 Over \$1,000,000 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSITION Attorney at Law

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/12 _____/_____/12
 \$10,001 - \$100,000 _____/_____/12 _____/_____/12
 \$100,001 - \$1,000,000 _____/_____/12 _____/_____/12
 Over \$1,000,000 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting Investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 _____/_____/12 _____/_____/12
 \$2,000 - \$10,000 _____/_____/12 _____/_____/12
 \$10,001 - \$100,000 _____/_____/12 _____/_____/12
 \$100,001 - \$1,000,000 _____/_____/12 _____/_____/12
 Over \$1,000,000 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NATURE OF INVESTMENT
 Partnership Sole Proprietorship _____ Other

YOUR BUSINESS POSMON _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 _____/_____/12 _____/_____/12
 \$10,001 - \$100,000 _____/_____/12 _____/_____/12
 \$100,001 - \$1,000,000 _____/_____/12 _____/_____/12
 Over \$1,000,000 _____/_____/12 _____/_____/12
 ACQUIRED DISPOSED

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership
 Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting Investments or real property are attached

Comments: _____

SCHEDULE D
Income – Gifts

Name
 1201 K st, Ste 1850

▶ NAME OF SOURCE (Not an Acronym)
 Civil Justice Association of CA

ADDRESS (Business Address Acceptable)
 1201 K st, St 1850, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 28 / 12	\$ 79.36	Board Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Los Angeles Area Chamber of Commerce

ADDRESS (Business Address Acceptable)
 350 S. Bixel Street, Los Angeles, CA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Advocacy

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 26 / 12	\$ 140.58	Inaugural Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 CA Democratic Party

ADDRESS (Business Address Acceptable)
 1401 21st Street, Ste 200, Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Political Party

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 11 / 12	\$ 61.71	Lunch
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Toni Atkine for Assembly 2012

ADDRESS (Business Address Acceptable)
 330 Encinitas Blvd, Ste 101, Encinitas, CA 92024

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Campaign

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
15 / 11 / 12	\$ 29.02	Dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 John A. Perez for Assembly 2012

ADDRESS (Business Address Acceptable)
 777 Figueroa, # 4050, Los Angeles, CA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Campaign

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 16 / 12	\$ 21.07	Breakfast
02 / 12 / 12	\$ 85.80	Personalized bowl
02 / 12 / 12	\$ 49.40	Welcome reception
___ / ___ / ___	\$ _____	_____

▶ 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
Richard Bloom

- You must 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. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
Chinese People's Assn for Friendship etc

ADDRESS (Business Address Acceptable)
No. 1 Tallchang Street, Doncheng District

CITY AND STATE
Beijing, China 100740

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Encourage trade, friendship between CA/China

DATE(S): 6 / 16 / 12 - 6 / 26 / 12 AMT: \$ \$10,000 (est)
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description
~~Airfare, lodging, ground transportation & meals for conference and meetings with CA Mayors, business leaders, Chinese political leaders, State Department~~

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

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

DATE(S): _____ AMT: \$ _____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

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

DATE(S): _____ AMT: \$ _____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

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

DATE(S): _____ AMT: \$ _____
(if gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel

Other - Provide Description

Comments: _____



CALIFORNIA
DEMOCRATIC
PARTY

12/7/12

Assemblymember Richard Bloom
State Capitol, Room 3132
Sacramento CA 95814

Dear Assemblymember:

This letter is to inform you of gift(s) you received from the California Democratic Party in conjunction with your participation in the Assembly Democratic Caucus New Member lunch, held November 8, 2012 at the Citizen Hotel, Sacramento CA.

This notification is a courtesy, should it be necessary for your reporting purposes.

Date: November 8, 2012
Description: Democratic New Member lunch – meal(s)
Amount: \$81.71

Please feel free to contact me with any questions.

Thank you.

Sincerely,

(d)(5)


Doug Ackman
California Democratic Party

CHAIRMAN

SENATOR (RET)
JOHN BURTON

1401 21ST STREET, #200
SACRAMENTO, CA 95811

PH (916) 442-5707

FX (916) 442-5715

www.cadem.org

Ouji, Sana

From: MacNeil, Sean
Sent: Sunday, January 13, 2013 1:39 PM
To: Ouji, Sana
Subject: Fwd: dinner at Zocalo's 11/15/12

Pls add to Richard's gift file.

Sent from my iPhone

Begin forwarded message:

From: "Shin, Chinook" <Chinook.Shin@asm.ca.gov>
Date: January 13, 2013 11:06:07 AM PST
To: "Mitchell, Susan" <Susan.Mitchell@asm.ca.gov>, "Simpson, Tisha" <Tisha.Simpson@asm.ca.gov>, "MacNeil, Sean" <Sean.MacNeil@asm.ca.gov>, "Pandelopoulos, Gina" <Gina.Pandelopoulos@asm.ca.gov>
Cc: "King, Cheri" <Cheri.King@asm.ca.gov>, "Strahan, Anna" <Anna.Strahan@asm.ca.gov>
Subject: dinner at Zocalo's 11/15/12

Your Members attended a dinner at Zocalo's on 11/15/12, with Majority Leader Atkins and Speaker Perez.

The following information is provided to you for your 2012 gift reporting purposes:

What: Dinner at Zocalo Restaurant, Sacramento

Date: 11/15/12

Cost per person: \$29.02

From:

Toni Atkins for Assembly 2012

330 Encinitas Blvd., Ste. 101

Encinitas, CA 92024

Please let me know if you have any questions.

RECEIVED

APR 11 2013

BY: llg

SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION AMENDMENT

1. BUSINESS ENTITY OR TRUST
Law & Consulting Offices of Richard Bloom
Name
Assessor's Parcel Number 4273 013 025
Address (Business Address Acceptable)
Check one
Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$0 - \$1,999
\$2,000 - \$10,000
\$10,001 - \$100,000
\$100,001 - \$1,000,000
Over \$1,000,000
NATURE OF INVESTMENT
Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION Attorney at Law
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:
INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000
\$10,001 - \$100,000
\$100,001 - \$1,000,000
Over \$1,000,000
NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership
Leasehold Yrs. remaining Other
Check box if additional schedules reporting investments or real property are attached
Comments:

Filer's Verification

Print Name Richard Bloom
Office, Agency or Court CA State Assembly
Statement Type 2012/2013 Annual Annual Assuming Leaving Candidate
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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
Date Signed 4/11/13 (month, day, year)
Filer's Signature (d)(5)



JOHN A. PÉREZ
SPEAKER OF THE ASSEMBLY

December 11, 2012

Assemblymember Richard Bloom
State Capitol, Room 3132
Sacramento CA 95814

Dear Assemblymember Bloom,

This letter is sent to notify you that I made a reportable gift to you from my committee account. Information about the gift is as follows:

Donor: John A. Pérez for Assembly 2012
777 S. Figueroa #4050
Los Angeles CA 90017

Date: November 16, 2012
Description: Breakfast at the Grange
Amount: \$21.07

As you know, the recipient of a gift is reportable, but its value may be fully or partially reimbursed within 30 days of receipt. While reimbursement for the gift is not required, if you would like to send a payment, please make the check payable to John A. Pérez for Assembly 2012, and mail to Karen McDonough, 777 S. Figueroa, #4050, Los Angeles, CA 90017.

Please do not hesitate to contact Anna Strahan at (916) 319-2053 if you have any questions.

Sincerely,

(d)(5)

John A. Pérez
Speaker of the Assembly



JOHN A. PÉREZ
SPEAKER OF THE ASSEMBLY

February 6, 2013

Assemblymember Richard Bloom
State Capitol – Room 3132
Sacramento, CA 95814

Dear Assemblymember Bloom:

The following information is provided to assist you with your Form 700 gift disclosure obligations.

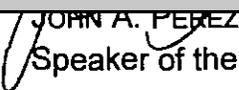
Date of gift:	December 2, 2012
Description of gift:	Personalized green glass bowl
Value of gift:	\$85.80
Name and address of donor:	John A. Pérez for Assembly 2012 777 South Figueroa Street, Suite 4050 Los Angeles, CA 90017

Date of gift:	December 2, 2012
Description of gift:	Assembly Welcome Reception
Value of gift:	\$49.40
Name and address of donor:	John A. Pérez for Assembly 2012 777 South Figueroa Street, Suite 4050 Los Angeles, CA 90017

Please contact Mary Kaems or Anna Strahan at 319-2053 if you have any questions about this letter.

Sincerely,

(d)(5)


Speaker of the Assembly

JAP: mk

Paid for by John A. Pérez for Assembly 2012 • FPPC ID#: 1333592 • 777 South Figueroa Street, Suite 4050, Los Angeles, California 90017
Tel: 213.452.6553 • Fax: 800.228.5168 • email: info@PerezForAssembly.com • www.PerezForAssembly.com

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