

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Initial Filing
Received
Official Use Only

E-Filed
03/27/2015
13:58:26
Filing ID:
154804651

CG

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Zapf, Lorie M

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of San Diego
Division, Board, Department, District, if applicable
Your Position
Councilmembers
CouncilMember District 2

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: *SEE ATTACHED FOR ADDITIONAL POSITIONS Position:

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

- State Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County County of
- City of San Diego Other

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

- Annual: The period covered is January 1, 2014, through December 31, 2014
- Leaving Office: Date Left ____/____/____ (Check one)
- Assuming Office: Date assumed ____/____/____
- Candidate: Election Year ____ and office sought, if different than Part 1: ____

4. Schedule Summary

- Check applicable schedules or "None." Total number of pages including this cover page: 6
- 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
- None - No reportable interests on any schedule

Date Signed 03/27/2015
(month, day, year)

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
Expanded Statement Attachment**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Lorie M Zapf

Agency	Division/Board/Dept/District	Position	Type of Statement
City of San Diego	Smart Growth and Land Use	Chair	Annual 1/1/2014 - 12/31/2014
City of San Diego	Infrastructure	Member	Annual 1/1/2014 - 12/31/2014
City of San Diego	Audit	Member	Annual 1/1/2014 - 12/31/2014
SANDAG	Board of Directors	1st Alternate	Annual 1/1/2014 - 12/31/2014
County of San Diego	LAFCO	Member	Annual 1/1/2014 - 12/31/2014
County of San Diego	MTS	Board of Directors	Annual 1/1/2014 - 12/31/2014
SANDAG	Public Safety	Alternate	Annual 1/1/2014 - 12/31/2014
SANDAG	Shoreline Committee	Vice Chair	Annual 1/1/2014 - 12/31/2014
SANDAG	Regional Planning	Member	Annual 1/1/2014 - 12/31/2014
SANDAG	Executive Committee	Alternate	Annual 1/1/2014 - 12/31/2014

SCHEDULE C

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name _____

Zapf, Lorie M

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
PAYPROS

ADDRESS (Business Address Acceptable)
8200 Central Ave
Newark, CA 94560

BUSINESS ACTIVITY, IF ANY, OF SOURCE
SALES/CONSULTING

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

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

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
 Schedule A-2.)

Sale of _____
 (Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

_____ (Describe)

Other _____
 (Describe)

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

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

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary Spouse's or registered domestic partner's income
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
 Schedule A-2.)

Sale of _____
 (Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

_____ (Describe)

Other _____
 (Describe)

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, 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 _____

HIGHEST BALANCE DURING REPORTING PERIOD

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

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN

None Personal residence

Real Property _____
 Street address _____
 City _____

Guarantor _____

Other _____
 (Describe)

Comments: _____

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
 Zapf, Lorie M

**SCHEDULE D
 Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)
Clay Companies
 ADDRESS (Business Address Acceptable)
 2251 San Diego Ave
 San Diego, CA 92110
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Government and Community Relations firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 21 / 14	\$ 52.00	Farmers Open Breakfast ticket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
2-1-1 San Diego
 ADDRESS (Business Address Acceptable)
 PO Box 420039
 San Diego , CA 92142
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 21 / 14	\$ 150.00	luncheon
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Hotel-Motel Association
 ADDRESS (Business Address Acceptable)
 1945 Quivera Way
 San Diego, CA 92109
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 13 / 14	\$ 75.00	Gold Key Awards
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Downtown San Diego Partnership
 ADDRESS (Business Address Acceptable)
 401 B St. Ste 100
 San Diego , CA 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 16 / 14	\$ 12.00	Imagine Reception at Higgs Fletcher and
10 / 09 / 14	\$ 77.00	Alonso Awards Dinner
02 / 13 / 14	\$ 77.00	Installation Dinner
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
2-1-1 San Diego
 ADDRESS (Business Address Acceptable)
 PO Box 420049
 San Diego, CA 92142
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 21 / 14	\$ 150.00	Annual luncheon
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
San Diego Opera
 ADDRESS (Business Address Acceptable)
 233 A St Ste 500
 San Diego, CA 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 26 / 14	\$ 100.00	Noche de Opera Reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

**SCHEDULE D
 Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)
Asian Pacific American Coalition
 ADDRESS (Business Address Acceptable)
PO Box 261243
San Diego, CA 92196
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>03 / 14 / 14</u>	\$ <u>75.00</u>	<u>Awards Dinner</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Scripps Healthcare
 ADDRESS (Business Address Acceptable)
4275 Campus Point Ct
San Diego, CA 92121
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 19 / 14</u>	\$ <u>70.00</u>	<u>Taxpayers Assoc Golden Fleece Awards</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
San Diego County Fair Board
 ADDRESS (Business Address Acceptable)
2260 Jimmy Durante Blvd.
Del Mar, CA 92014
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>06 / 25 / 14</u>	\$ <u>159.00</u>	<u>San Diego County Fair Buffet and concert</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
San Diego and Portuguese American Association
 ADDRESS (Business Address Acceptable)
2818 Avenida De Portugal
San Diego, CA 92107
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 27 / 14</u>	\$ <u>50.00</u>	<u>Cabrillo Festival</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Point Loma Association
 ADDRESS (Business Address Acceptable)
PO Box 60212
San Diego, CA 92166
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10 / 17 / 14</u>	\$ <u>75.00</u>	<u>Pt. Loma assoc Dinner</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
San Diego Air and Space Museum
 ADDRESS (Business Address Acceptable)
2001 Pan American Plaza
San Diego, CA 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>11 / 01 / 14</u>	\$ <u>250.00</u>	<u>International Air and Space Hall of Fame</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

Comments: _____

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name _____
 Zapf, Lorie M

**SCHEDULE D
 Income – Gifts**

▶ NAME OF SOURCE (Not an Acronym)
San Diego Regional Chamber of Commerce
 ADDRESS (Business Address Acceptable)
 402 W. Broadway
 San Diego, CA 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 25 / 14	\$ 65.00	Chamber Installation Dinner
11 / 18 / 14	\$ 29.00	Legislative Lounge
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
Seaworld
 ADDRESS (Business Address Acceptable)
 500 SeaWorld Dt
 San Diego, CA 92109
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 20 / 14	\$ 75.00	50th Anniversary Celebration
03 / 21 / 14	\$ 35.00	Ribbon cutting ceremony
___ / ___ / ___	\$ _____	_____

▶ 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: _____