CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS

CG

COVER PAGE

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JUL 17 2015

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
ZAPIEN	MOSES	

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
CITY OF STOCKTON

Division, Board, Department, District, if applicable: DISTRICT 4

Your Position: COUNCILMEMBER

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

Agency: SEE ATTACHMENT A

Position: SEE ATTACHMENT A

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of STOCKTON
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☑ County of SAN JOAQUIN
- ☐ Other _____

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

☑ **Annual:** The period covered is January 1, 2014, through December 31, 2014.

-or-

The period covered is ___/___/_____, through December 31, 2014.

☐ **Assuming Office:** Date assumed ___/___/_____

☐ **Candidate:** Election year _____ and office sought, if different than Part 1: _____

☐ **Leaving Office:** Date Left ___/___/_____ *(Check one)*

○ The period covered is January 1, 2014, 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: 2

- ☐ **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*

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

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

Date Signed 07/17/2015 (month, day, year)

Signatur

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

Name: LAW OFFICE OF MOSES ZAPIEN

Address (Business Address Acceptable): 1400 N. EL DORADO STREET

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

GENERAL DESCRIPTION OF THIS BUSINESS: LEGAL SERVICES PROVIDER

FAIR MARKET VALUE
☐ $0 - $1,999
☒ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
01 / 01 / 14 ACQUIRED
05 / 01 / 14 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☒ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION: ATTORNEY

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

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

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE

☒ None or ☐ Names listed below

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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
/ / 14 ACQUIRED
/ / 14 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:

Filer's Verification

Print Name MOSES ZAPIEN

Office, Agency or Court CITY OF STOCKTON

Statement Type ☒ 2014/2015 Annual ☐ _____ Annual (Or) ☐ 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 [redacted]

Date Signed 07/17/2015 (month, day, year) **Filer's Signature** [redacted]

(c)(1)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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FAIR POLITICAL PRACTICES COMMISSION
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CITY OF STOCKTON

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NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
ZAPIEN	MOSES	

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*
CITY OF STOCKTON

Division, Board, Department, District, if applicable: District 4

Your Position: Council Member

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

Agency: SEE ATTACHMENT A

Position: SEE ATTACHMENT A

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

- ☐ State
- ☐ Multi-County _____
- ☑ City of STOCKTON
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☑ County of SAN JOAQUIN
- ☐ Other _____

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

☑ **Annual:** The period covered is January 1, 2014, through December 31, 2014.

-or-

The period covered is ____/____/_____, through December 31, 2014.

☐ **Assuming Office:** Date assumed ____/____/_____

☐ **Leaving Office:** Date Left ____/____/_____ *(Check one)*

○ The period covered is January 1, 2014, through the date of leaving office.

○ The period covered is ____/____/_____, through the date of leaving office.

☐ **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 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*

(c)(1)

I certify under penalty of perjury under the laws of the State of California that t (c)(1)

Date Signed 03/30/2015
(month, day, year)

Signature

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

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
MOSES ZAPIEN

▶ 1. BUSINESS ENTITY OR TRUST

Law Office of Mark Choi
Name

1333 Howe Ave #110, Sacramento, CA 95825
Address (Business Address Acceptable)

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

GENERAL DESCRIPTION OF THIS BUSINESS
Legal Services Provider

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☑ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
05 / 15 / 14 ACQUIRED
/ / 14 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☑ Joint Venture (Other)

YOUR BUSINESS POSITION Of Counsel

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

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

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

☑ None or ☐ Names listed below

▶ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
/ / 14 ACQUIRED
/ / 14 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 THIS BUSINESS

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
/ / 14 ACQUIRED
/ / 14 DISPOSED

NATURE OF INVESTMENT
☐ Partnership ☐ Sole Proprietorship ☐ (Other)

YOUR BUSINESS POSITION

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

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

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☐ None or ☐ Names listed below

▶ 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
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
/ / 14 ACQUIRED
/ / 14 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: business entity outside jurisdiction; informational only

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
MOSES ZAPIEN

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
AT&T California
ADDRESS *(Business Address Acceptable)*
5555 E. Olive Avenue Room 108 Fresno, CA 93727
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Telecommunications

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 24 / 14	$ 272.06	Basketball Tickets
12 / 08 / 14	$ 160.15	Basketball Tickets
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
AIPAC
ADDRESS *(Business Address Acceptable)*
PO Box 96727 Washington DC 20077-7617
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Action Committee

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 26 / 14	$ 75.00	Luncheon
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Ruhstaller for Stockton East Water District 2014
ADDRESS *(Business Address Acceptable)*
18 E Sonoma Ave Stockton, CA 95204-3435
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Campaign

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 02 / 14	$ 250.00	Fundraising Event
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Galgiani for Senate 2016
ADDRESS *(Business Address Acceptable)*
10011 Folsom Blvd. #263, Sacramento CA 95827
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Campaign

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 14	$ 50.00	Fundraising Event
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Local Government Commission
ADDRESS *(Business Address Acceptable)*
980 9th Street, Suite 1700 Sacramento, CA
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Nonprofit organization fostering innovation in environ

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 14 / 14	$ 50.00	Dinner Forum
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Jane Butterfield
ADDRESS *(Business Address Acceptable)*
925 Bristol Avenue Stockton CA 95204
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Retired

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 02 / 14	$ 150.00	Fundraising Dinner
/ /	$	
/ /	$	

Comments:

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
MOSES ZAPIEN

SCHEDULE D
Income – Gifts

► NAME OF SOURCE *(Not an Acronym)*
McNerney for Congress
ADDRESS *(Business Address Acceptable)*
PO Box 690371 Stockton, CA 95269
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Political Campaign

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 27 / 14	$ 50.00	Fundraising Event
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
John R. Vera
ADDRESS *(Business Address Acceptable)*
1001 W. Lincoln Rd. Stockton CA 95207
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Retired

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 18 / 14	$ 100.00	Fundraising Event
01 / 25 / 14	$ 50.00	Fundraising Event
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Pacific Athletic Foundation
ADDRESS *(Business Address Acceptable)*
3601 Pacific Ave., Stockton CA 95211
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sports Activity non-profit organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 23 / 14	$ 90.00	Dinner Fundraiser
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
San Joaquin Regional Transit District
ADDRESS *(Business Address Acceptable)*
P.O. Box 201010 Stockton, CA 95201
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Transit Governmental Agency

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 06 / 14	$ 31.75	Dinner
04 / 08 / 14	$ 76.00	Dinner
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
Port of Stockton
ADDRESS *(Business Address Acceptable)*
2201 W Washington St, Stockton, CA 95203
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Port Governmental Agency

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 07 / 14	$ 150.00	Dinner
/ /	$	
/ /	$	

► NAME OF SOURCE *(Not an Acronym)*
San Joaquin Regional Rail Commission
ADDRESS *(Business Address Acceptable)*
949 Channel St, Stockton, CA 95202 (209) 944-6220
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Regional Rail Governmental Agency

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 06 / 14	$ 31.75	Dinner
/ /	$	
/ /	$	

Comments: Total cost of dinner on 4/6/14 was shared by both San Joaquin Regional Rail Commission and San Joaquin Regional Transit District

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name
MOSES ZAPIEN

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

- **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)*
Sino American Trade Development Association
ADDRESS *(Business Address Acceptable)*
6-3-202 Liren Street West District
CITY AND STATE
Beijing, China
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Foreign trade development association
DATE(S): 06/05/14 - 06/11/14 *(If gift)* AMT: $ 2,500.00
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☑ Made a Speech/Participated in a Panel
☑ Other - Provide Description
for travel and related expenses, including lodging and meals, made on official trade development trip.

► NAME OF SOURCE *(Not an Acronym)*
State Bar of California, CA Young Lawyers Assoc.
ADDRESS *(Business Address Acceptable)*
180 Howard Street
CITY AND STATE
San Francisco, CA
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional Association of Attorneys
DATE(S): 01/01/14 - 12/31/14 *(If gift)* AMT: $ 1,899.48
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☑ Made a Speech/Participated in a Panel
☑ Other - Provide Description
for travel and related expenses, including lodging and meals to attend board meetings.

► NAME OF SOURCE *(Not an Acronym)*
San Joaquin County Bar Association
ADDRESS *(Business Address Acceptable)*
20 N. Sutter Street
CITY AND STATE
Stockton, CA
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional Association of Attorneys
DATE(S): 01/01/14 - 12/31/14 *(If gift)* AMT: $ 144.00
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
Lunch provided at committee and board meetings

► NAME OF SOURCE *(Not an Acronym)*
San Joaquin County Bar Association
ADDRESS *(Business Address Acceptable)*
20 N. Sutter Street
CITY AND STATE
Stockton, CA
☐ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional Association of Attorneys
DATE(S): 09/11/14 - 09/14/14 *(If gift)* AMT: $ 571.92
TYPE OF PAYMENT: (must check one) ☐ Gift ☑ Income
☐ Made a Speech/Participated in a Panel
☑ Other - Provide Description
for travel and related expenses, including lodging and meals to attend Annual State Bar Meeting.

Comments:

Name: Moses Zapien

California FPPC Form 700

Attachment A

Agency	Position
City of Stockton Public Financing Authority	Board Member
San Joaquin Council of Governments	Board Member
City of Stockton Successor Agency Oversight Board	Board Member
Northeastern San Joaquin Co. Groundwater Banking Authority	Board Member