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FEB 27 2013

CALIFORNIA FORM 700

STATEMENT OF ECONOMIC INTERESTS

FAIR POLITICAL PRACTICES COMMISSION

COVER PAGE

A PUBLIC DOCUMENT



Please type or print in ink.

Deputy Clerk WKS

NAME OF FILER (LAST) FEDWORTH (FIRST) WILLIAM (MIDDLE) W

1. Office, Agency, or Court

Agency Name FOURTH DISTRICT COURT OF APPEAL, DIVISION 3  
Division, Board, Department, District, if applicable  
Your Position ASSOCIATE JUSTICE

If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

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

- State
- Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_
- County of \_\_\_\_\_
- City of \_\_\_\_\_
- Other \_\_\_\_\_

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

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

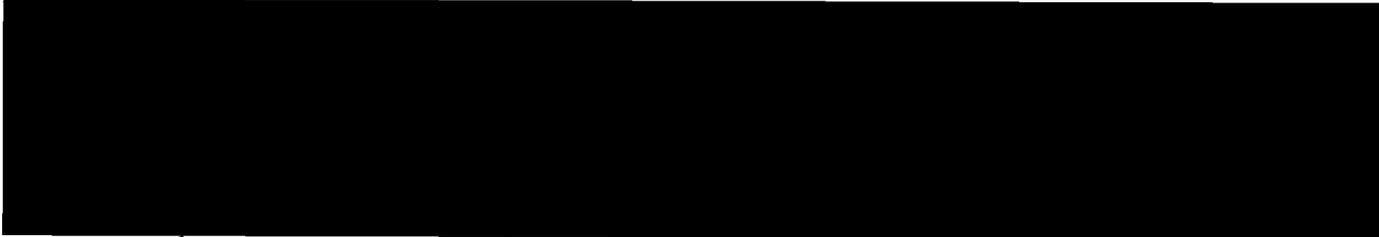
4. Schedule Summary

Check applicable schedules or "None."

Total number of pages including this cover page: 8

- 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
- or-
- None - No reportable interests on any schedule

5. Verification



I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/27/13  
(month, day, year)

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
RED SWORN

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
COAST COMMUNITY COLLEGE DISTRICT

ADDRESS (Business Address Acceptable)  
15744 HOWLAND STREET

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
EDUCATION

YOUR BUSINESS POSITION INDEPENDENT CONTRACTOR  
PRODUCER OF TRAINING VIDEOS

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  
 Loan repayment     Partnership  
 Sale of TRAINING VIDEOS (RECORDING)  
(Real property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
UCI SCHOOL OF LAW

ADDRESS (Business Address Acceptable)  
401 E. PETERSON DR., IRVINE, CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
LAW SCHOOL

YOUR BUSINESS POSITION  
ADJUNCT FACULTY MEMBER

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  
 Loan repayment     Partnership  
 Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 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: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
WOLFWORTH

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
ORANGE COUNTY BAR ASSOCIATION

ADDRESS (Business Address Acceptable)  
PO Box 17777, Irvine, CA. 92613

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
LOCAL BAR ASSOCIATION

YOUR BUSINESS POSITION  
INDEPENDENT CONTRACTOR (COLUMNIST)

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  
 Loan repayment     Partnership  
 Sale of MONTHLY HUMOR COLUMN  
(Real property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
AMERICAN LAWYER MEDIA, INC.

ADDRESS (Business Address Acceptable)  
120 BROADWAY, N.Y., N.Y. 10271

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
PUBLISHER

YOUR BUSINESS POSITION  
INDEPENDENT CONTRACTOR (COLUMNIST)

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  
 Loan repayment     Partnership  
 Sale of MONTHLY HUMOR COLUMN  
(Real property, car, boat, etc.)  
 Commission or     Rental Income, list each source of \$10,000 or more  
 \_\_\_\_\_  
 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: \_\_\_\_\_

**SCHEDULE D**  
**Income - Gifts**

▶ NAME OF SOURCE (Not an Acronym)  
FRANK QUINLAN / FRANK ZARNO  
 ADDRESS (Business Address Acceptable)  
600 NEWPORT GR. DR. BOX 1994  
NEWPORT BEACH, CA 92660 SANTA AVE, Co. 92701  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
ATTORNEY / JUDGE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2, 3, 12</u>	<u>\$ 1500</u>	<u>DISCOUNT ON USE OF VACATION HOME</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
JOHN LEMOS  
 ADDRESS (Business Address Acceptable)  
620 NEWPORT GR. DR. NEWPORT BEACH, CA. 92660  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
MORTGAGE BROKER

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1, 10, 12</u>	<u>\$ 250</u>	<u>HOCKEY TICKETS</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
FRANK BORBORO  
 ADDRESS (Business Address Acceptable)  
1111 N. BROADWAY, SANTA AVE 92701  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
ATTORNEY

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7, 26, 12</u>	<u>\$ 400</u>	<u>DINNER &amp; WINE TICKETS</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
BRETT BROCKMEYER  
 ADDRESS (Business Address Acceptable)  
725 S. FAVERON ST. LOS ANGELES CA. 90017  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
GOLF AGENT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4, 1, 12</u>	<u>\$ 150</u>	<u>ROUND OF GOLF</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
CHRISTOPHER DOY  
 ADDRESS (Business Address Acceptable)  
301 W. FIRST ST. WEST, CA. 92780  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
MEDIATOR

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4, 2, 12</u>	<u>\$ 400</u>	<u>BASEBALL TICKETS</u>
<u>8, 10, 12</u>	<u>\$ 400</u>	<u>BASEBALL TICKETS</u>
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
MATT DOUDOU  
 ADDRESS (Business Address Acceptable)  
1800 CARSON CRYSTAL, CA, CA. 92709  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
GOLF COURSE MANAGEMENT

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3, 11, 12</u>	<u>\$ 534</u>	<u>GOLF DISCOUNTS</u>
<u>12, 30, 12</u>	<u>\$ _____</u>	<u>(SEE ATTACHMENT)</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

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

My friend Matt Donovan is a partner in a golf course management company. The company extends a law enforcement discount to judges, prosecutors, police, etc., (both active and retired). Matt, as a personal favor, extends that rate not just to me but also to whoever plays with me. The result is a discount of between \$29 and \$61 dollars a round, depending on when the round is played.

Last year, 6 people took advantage of that discount for a total gift of \$534 dollars (4 rounds at \$61 and 10 rounds at \$29). I did not include in this computation judges, prosecutors, police, ex-prosecutors or ex-judges, who would be entitled to it without regard to the fact they were playing with me.

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

Name  
REDSWORTH

- 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)  
AMERICAN BOARD OF TRIAL ADVOCATES

ADDRESS (Business Address Acceptable)  
2801 BRYAN ST., STE 3000, ~~IRVING~~

CITY AND STATE  
DALLAS, TEXAS 75201

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

DATE(S): 11/1/12 - 11/3/12 AMT: \$ 1401  
*(if gift)*

TYPE OF PAYMENT: (must check one)  Gift  Income

Made a Speech/Participated in a Panel  
 Other - Provide Description  
Cal ABOTA Office: 5567 REXFORD BLVD  
IRVING, CA. 91536

▶ 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: \_\_\_\_\_