

AN GZ

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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

RECEIVED
STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION

Date Received
Official Use Only

Please type or print in ink.

2013 MAR -6 PM 11:20

COVER PAGE

2013 FEB 28 PM 4:39

NAME OF FILER (LAST) (FIRST) (MIDDLE)
DESANTOS THOMAS
SUPERIOR COURT OF CALIFORNIA
COUNTY OF KINGS

1. Office, Agency, or Court

Agency Name
SUPERIOR COURT OF CALIFORNIA, COUNTY OF KINGS
Division, Board, Department, District, if applicable
Your Position
JUDGE

Handwritten signature: Nancy P. 20

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

Agency: _____ Position: _____

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

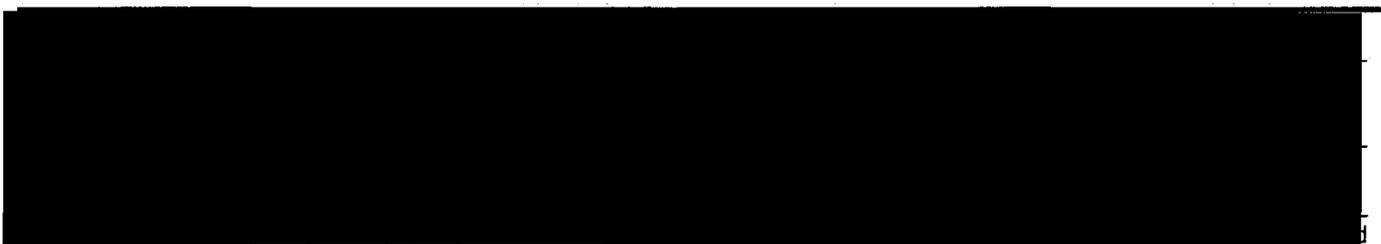
- State
- Judge or Court Commissioner (Statewide Jurisdiction)
- Multi-County _____
- County of _____
- City of _____
- Other _____

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)
- Multi-County: 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: 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
- or-
- None - No reportable interests on any schedule



herein and in any attached schedules is true and complete. I a
I certify under penalty of perjury under the laws of the State

Date Signed 2-28-13
(month, day, year)

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
DESANTOS, THOMAS

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
905 WASHINGTON STREET

CITY
HANFORD, CA. 93230

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

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.
 None

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

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

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.
 None

* 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 D
Income - Gifts**

Name
DESANTOS, THOMAS

▶ NAME OF SOURCE (Not an Acronym)
KINGS COUNTY BAR ASSOCIATION

ADDRESS (Business Address Acceptable)
C/O P.O. BOX 330 HANFORD, CA. 93230

BUSINESS ACTIVITY, IF ANY, OF SOURCE
COUNTY BAR ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 27 / 12	\$ 75	ANNUAL DINNER
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
***ABOTA SAN JOAQUIN VALLEY CHAPTER**

ADDRESS (Business Address Acceptable)
(c/o Cornwall & Sample 7045 N. Fruit Fresno, CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE
BAR ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 05 / 12	\$ 75	ANNUAL DINNER
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
****ABTL (c/o Weakley & Arendt, LLP)**

ADDRESS (Business Address Acceptable)
1630 E. Shaw Ave., Suite 176 Fresno, CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Bar Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 08 / 12	\$ 20	ED. PRGM. DINNER
07 / 26 / 12	\$ 75	ED. PRGM. DINNER
11 / 10 / 12	\$ 75	ED. PRGM. DINNER

▶ 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: *American Board of Trial Advocates San Joaquin Valley Chapter
 **Association of Business Trial Lawyers San Joaquin Valley Chapter

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

Name
 DESANTOS, THOMAS

- 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)
 THE NATIONAL JUDICIAL COLLEGE

ADDRESS (Business Address Acceptable)
 UNIVERSITY OF NEVADA (MS 358)

CITY AND STATE
 RENO, NV 89557

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

DATE(S): 09 / 10 / 12 - 09 / 11 / 12 AMT: \$ 114.00
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description

REIMBURSEMENT FOR MEALS

▶ 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: _____