

AN

GZ

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

FILED

Date Received
Official Use Only

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
COVER PAGE

2013 FEB 22 AM 8:33

Please type or print in ink.

NAME OF FILER (LAST) LAPORTE (FIRST) JAMES
2012 FEB 27 AM 11:36
TERRY PARSON (MIDDLE)
SUPERIOR COURT
OF CALIFORNIA
COUNTY OF KINGS

1. Office, Agency, or Court

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

► 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 KINGS
 City of _____ Other _____

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

Annual: The period covered is January 1, 2012, through December 31, 2012.
-or-
The period covered is ____/____/____, through December 31, 2012.
 Assuming Office: Date assumed ____/____/____
 Leaving Office: Date Left ____/____/____ (Check one)
 The period covered is January 1, 2012, 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: 4
 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 2/22/13
(month, day, year)

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

| |
|--|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name LAPORTE, JAMES |
|--|

| ▶ 1. INCOME RECEIVED | ▶ 1. INCOME RECEIVED |
|--|--|
| NAME OF SOURCE OF INCOME _____ | NAME OF SOURCE OF INCOME _____ |
| ADDRESS (Business Address Acceptable) _____ | ADDRESS (Business Address Acceptable) _____ |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE _____ | BUSINESS ACTIVITY, IF ANY, OF SOURCE _____ |
| YOUR BUSINESS POSITION _____ | YOUR BUSINESS POSITION _____ |
| GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 | GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small> | CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Real property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <small>(Describe)</small> |

▶ 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* _____ | INTEREST RATE _____ % <input type="checkbox"/> None | TERM (Months/Years) _____ |
| ADDRESS (Business Address Acceptable) _____ | SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <small>Street address</small> _____ <small>City</small> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <small>(Describe)</small> | |
| BUSINESS ACTIVITY, IF ANY, OF LENDER _____ | | |
| HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 | | |

Comments: SPOUSE IS EMPLOYED BY KINGS COUNTY, PART-TIME

**SCHEDULE D
 Income - Gifts**

Name
LAPORTE, JAMES

▶ NAME OF SOURCE (Not an Acronym)
UNIVERSITY SANTA CLARA LAW SCHOOL

ADDRESS (Business Address Acceptable)
500 EL CAMINO ROAD SANTA CLARA, CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE
LAW SCHOOL

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 02 / 23 / 12 | \$ 25 | ED. PROGRAM |
| ___ / ___ / ___ | \$ _____ | _____ |
| ___ / ___ / ___ | \$ _____ | _____ |

▶ 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) |
|-----------------|----------|------------------------|
| ___ / ___ / ___ | \$ _____ | _____ |
| ___ / ___ / ___ | \$ _____ | _____ |
| ___ / ___ / ___ | \$ _____ | _____ |

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