

RECEIVED COVER PAGE
FAIR POLITICAL PRACTICES COMMISSION

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LOS ANGELES COUNTY

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Murphy Mary Ann
2013 MAR -8 AM 11:48
2013 MAR -1 PM 1:37

1. Office, Agency, or Court

CAMPAIGN FINANCE
DISCLOSURE SECTION

Agency Name
Los Angeles Superior Court
Division, Board, Department, District, if applicable
Your Position
Judge of the Superior Court

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

Agency: _____ Position: _____

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

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

5. Verification

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

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

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

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Mary Ann Murphy

NAME OF BUSINESS ENTITY: SPDR Gold Trust (GLD)
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Gold ETF
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Other

NAME OF BUSINESS ENTITY: Apple (AAPL)
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Technology Hardware
FAIR MARKET VALUE: \$100,001 - \$1,000,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: United States Brent Oil LP (BNO)
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Limited Partnership
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Partnership

NAME OF BUSINESS ENTITY: Caterpillar (CAT)
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Heavy equipment manufacturer
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: Adobe Systems Inc. (ADBE)
GENERAL DESCRIPTION OF BUSINESS ACTIVITY: Software
FAIR MARKET VALUE: \$2,000 - \$10,000
NATURE OF INVESTMENT: Stock

NAME OF BUSINESS ENTITY: Proshares Ultrashort Euro (EUO)
GENERAL DESCRIPTION OF BUSINESS ACTIVITY:
FAIR MARKET VALUE: \$10,001 - \$100,000
NATURE OF INVESTMENT: Other

Comments:

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Mary Ann Murphy

▶ NAME OF BUSINESS ENTITY
Proshares Ultrashort Euro (EUO)

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
ETF

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT ETF
 Stock Other _____
(Describe)

Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
2 / 16 / 12 3 / 21 / 12
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Proshares Ultrashort Euro (EUO)

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
ETF

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT ETF
 Stock Other _____
(Describe)

Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
4 / 10 / 12 5 / 16 / 12
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Proshares Ultrashort Yen (YCS)

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
ETF

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT ETF
 Stock Other _____
(Describe)

Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
3 / 19 / 12 9 / 14 / 12
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Proshares Ultrashort S&P 500 (SDS)

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
ETF

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT ETF
 Stock Other _____
(Describe)

Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
2 / 13 / 12 2 / 23 / 12
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)

Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____ / ____ / 12 ____ / ____ / 12
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)

Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____ / ____ / 12 ____ / ____ / 12
ACQUIRED DISPOSED

Comments: _____

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
 Mary Ann Murphy

1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME Thomson Reuters, West Servies, Inc.	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) 610 Opperman Dr., St. Paul MN 55123	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Legal publisher	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input checked="" 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	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 checked="" type="checkbox"/> Other Moderator, Civil Procedure Before Trial <small>(Describe)</small>	<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	TERM (Months/Years)
ADDRESS (Business Address Acceptable)	_____ % <input type="checkbox"/> None	_____
BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> Real Property _____	<small>Street address</small>
<input type="checkbox"/> \$1,001 - \$10,000	_____	<small>City</small>
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	<small>(Describe)</small>

Comments: _____

SCHEDULE D
Income - Gifts

Name
 Mary Ann Murphy

▶ NAME OF SOURCE (Not an Acronym)
 Chancery Club, 1975 Century Park East, Ste. 2200

ADDRESS (Business Address Acceptable)
 Los Angeles, CA 90067

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Voluntary bar Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 26 12	40	luncheon
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Rutter Group, 15760 Ventura Blvd., Ste 630,

ADDRESS (Business Address Acceptable)
 Encino, CA 91436

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Publisher, legal materials

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 10 12	52	faculty dinner
____/____/____	\$ _____	_____
5 17 12	40	Chancery Club
____/____/____	\$ _____	_____
____/____/____	\$ _____	luncheon

▶ NAME OF SOURCE (Not an Acronym)
 Kalman Zemplyny, Rutter Group, 15760 Ventura

ADDRESS (Business Address Acceptable)
 Blvd., Ste. 630, Encino, CA 91436

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Executive Director & General Manager, Rutter Group

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8 31 12	143	2 Hollywood Bowl
____/____/____	\$ _____	_____
____/____/____	\$ _____	tickets, parking
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Consumer Attorneys of Los Angeles, 800 W. 6th

ADDRESS (Business Address Acceptable)
 St., Ste. 700, Los Angeles CA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Voluntary Bar Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 21 12	150	Annual installation
____/____/____	\$ _____	_____
____/____/____	\$ _____	dinner
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 Association of Southern California Defense Counsel

ADDRESS (Business Address Acceptable)
 2520 Venture Oaks Way, Ste150, Sacramento 95833

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Voluntary bar association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 1 12	86	reception
____/____/____	\$ _____	_____
3 2 12	116	luncheon
____/____/____	\$ _____	_____
12 11 12	44	reception
____/____/____	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
 American Board of Trial Advocates, 5567 Reseda

ADDRESS (Business Address Acceptable)
 Blvd., Tarzana CA 91356-2648

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Voluntary bar association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
7 25 12	75	reception
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: _____

**SCHEDULE D
 Income - Gifts**

▶ NAME OF SOURCE *(Not an Acronym)*
 Metropolitan News Enterprise, 210 S. Spring St.,
 ADDRESS *(Business Address Acceptable)*
 Los Angeles, CA 90012
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Legal newspaper

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 12	\$ 35.00	Italian American
___ / ___ / ___	\$ _____	Lawyers dinner
___ / ___ / ___	\$ _____	meeting

▶ NAME OF SOURCE *(Not an Acronym)*
 Roger & Jo-Ann Grace, 210 S. Spring St.,
 ADDRESS *(Business Address Acceptable)*
 Los Angeles, CA 90012
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Co-publishers, Metropolitan News Enterprise

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 20 / 12	\$ 110.00	Reception and docent
___ / ___ / ___	\$ _____	tour of Greystone
___ / ___ / ___	\$ _____	mansion

▶ 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: _____