



CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

FILED
 SUPERIOR COURT OF CALIFORNIA
 COUNTY OF ORANGE
 CENTRAL JUSTICE CENTER
 Date Received
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FEB 26 2013

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 COVER PAGE
 FAIR POLITICAL PRACTICES COMMISSION

ALAN CARLSON, Clerk of the Court

Please type or print in ink.

NAME OF FILER (LAST) Hubbard (FIRST) Kim BY: Robertine (MIDDLE) DEPUTY

2013 MAR 11 PM 1:13

1. Office, Agency, or Court

Agency Name

Superior Court - Orange County Superior Court Judge
 Division, Board, Department, District, if applicable Your Position

► 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)
- or- The period covered is ____/____/____, through 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: _____

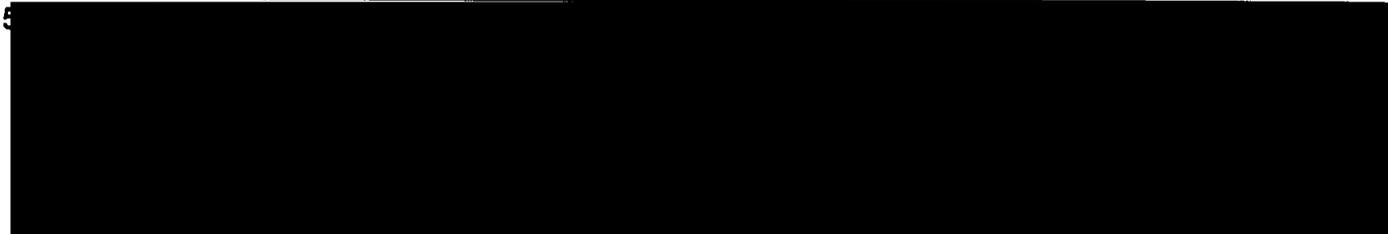
4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

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

Date Signed 2/24/13
 (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.

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Kim R. Hubbard

NAME OF BUSINESS ENTITY
LPL Financial

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Manager

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 American Balanced Fund Inc.
(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
LPL Financial

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Manager

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 Newworld Fund, Inc.
(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
LPL Financial

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Manager

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 Fundamental Investors Inc.
(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

NAME OF BUSINESS ENTITY
LPL Financial

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Manager

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 Strath Fund of America
(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 D
Income - Gifts**

Name _____

▶ NAME OF SOURCE (Not an Acronym)
AAML

ADDRESS (Business Address Acceptable)
Orange, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Voluntary legal Assoc.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>8/23/12</u>	<u>\$ 100</u>	<u>Dinner</u>
<u>12/16/12</u>	<u>\$ 150</u>	<u>Dinner</u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Council on Aging

ADDRESS (Business Address Acceptable)
Santa Ana, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit elder services

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3/4/12</u>	<u>\$ 50</u>	<u>Lunch</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Orange County Bar Assoc.

ADDRESS (Business Address Acceptable)
Newport Beach, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Voluntary legal Assoc.

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>1/13/12</u>	<u>\$ 65</u>	<u>Judge's Night</u>
<u>1/12/12</u>		<u>Probate Section</u>
<u>12/14/12</u>	<u>\$ 330</u>	<u>Family Law Sec.</u>
<u>11/7/12</u>	<u>\$ 125</u>	<u>Seminar</u>

▶ 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)
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE (Not an Acronym)
Attorney's Briefcase Seminars

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legal Education Provider

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/3/12</u>	<u>\$ 150</u>	<u>Seminar</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ 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)
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

Comments: _____