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CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS  
RECEIVED  
FAIR POLITICAL PRACTICES COMMISSION  
COVER PAGE

FILED  
COURT EXECUTIVE OFFICE  
Date Received  
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JAN - 4 2013  
By: [Signature]  
(MIDDLE) City Clerk  
Lewis

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)  
Huber Alyson

1. Office, Agency, or Court

Agency Name

Sacramento County, Superior Court

Division, Board, Department, District, if applicable

Your Position

Judge

► 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 Sacramento
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2011, through December 31, 2011.
- or-
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2011.
- Assuming Office: Date assumed 12 / 27 / 2012
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- The period covered is January 1, 2011, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_ through the date of leaving office.
- Candidate: Election Year \_\_\_\_\_ 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 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. [Redacted Signature Area]

herein and in any attached schedules is true and complete. I acknowledge that I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 12/31/2012  
(month, day, year)



**SCHEDULE D  
 Income - Gifts**

▶ NAME OF SOURCE  
Greenberg Traurig LLP  
 ADDRESS (Business Address Acceptable)  
1201 K St., Suite 1100, Sacramento CA 95814  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Employer

| DATE (mm/dd/yy)     | VALUE            | DESCRIPTION OF GIFT(S)          |
|---------------------|------------------|---------------------------------|
| <u>12 / 5 / 12</u>  | <u>\$ 50.00</u>  | <u>Gift card/Chili cook-off</u> |
| <u>12 / 17 / 12</u> | <u>\$ 100.00</u> | <u>Holiday Gift card</u>        |
| <u>12 / / 12</u>    | <u>\$ 100.00</u> | <u>Kings tickets, 2 games</u>   |

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

▶ NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

Comments: All reportable gifts received in 2012 as a member of the Legislature were reported on the Leaving Office statement. This report covers 12/1/12-12/31/12.