

GZ

STATEMENT OF ECONOMIC INTERESTS

RECEIVED
TULARE COUNTY SUPERIOR COURT
VISALIA DIVISION
ATTORNEY GENERAL'S OFFICE
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FEB 13 2013

LARAYNE CLEEK, CLERK

BY: *[Signature]*
(MIDDLE)

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) VORTMANN (FIRST) PAUL (MIDDLE) ANTHONY
2013 MAR - 1 AM 10:39

1. Office, Agency, or Court

Agency Name TULARE 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 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

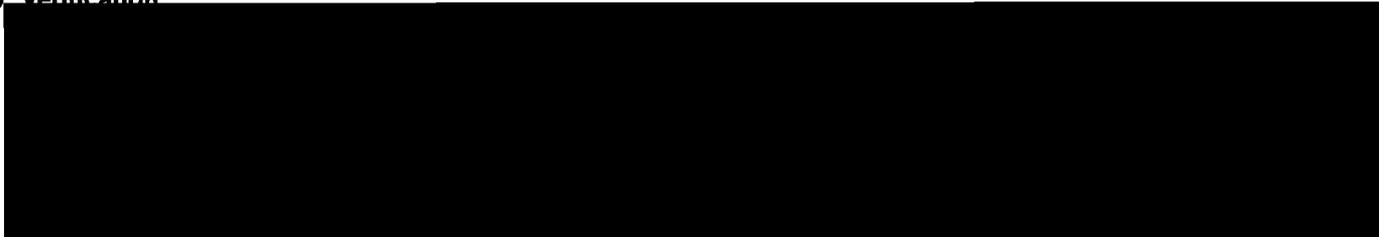
Check applicable schedules or "None."

► Total number of pages including this cover page: 5

- 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

5. Verification



I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2-13-13
(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

PAUL VORTMANN

▶ NAME OF BUSINESS ENTITY
BANK OF AMERICA

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

BANKING

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
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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 E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

- 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)
GOERGE MASON UNIVERSITY LAW & ECONOMIC

ADDRESS (Business Address Acceptable)
4400 UNIVERSITY DRIVE

CITY AND STATE
FAIRFAX, VA 22030

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

DATE(S): 11 / 11 / 12 - 11 / 13 / 12 AMT: \$ 1,103.84
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
TRAVEL, LODGING, MEAL EXPENSE FOR CIVIL JUSTICE SYMPOSIUM

▶ NAME OF SOURCE (Not an Acronym)
ASSOC. OF BUSINESS TRIAL LAWYERS

ADDRESS (Business Address Acceptable)
PO BOX 28902

CITY AND STATE
FRESNO CA 93729

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
BOARD OF DIRECTORS RETREAT

DATE(S): 09 / 18 / 12 - 09 / 23 / 12 AMT: \$ 1,169.60
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
ATTENDED AS MEMBER OF BOARD OF DIRECTORS

▶ NAME OF SOURCE (Not an Acronym)
ASSOC. OF BUSINESS TRIAL LAWYERS

ADDRESS (Business Address Acceptable)
PO BOX 28902

CITY AND STATE
FRESNO CA 93729

BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
ANNUAL CONFERENCE OF ASSOCIATION

DATE(S): 04 / 20 / 12 - 04 / 22 / 12 AMT: \$ 1,348.01
 (If gift)

TYPE OF PAYMENT: (must check one) Gift Income

Made a Speech/Participated in a Panel
 Other - Provide Description
JUDICIAL PARTICIPATION IN BREAK OUT GROUP

▶ 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: _____