

STATEMENT OF ECONOMIC INTERESTS

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FAIR POLITICAL PRACTICES COMMISSION

2-26-15

RJW

Please type or print in ink.

NAME OF FILER (LAST) Forcum (FIRST) Mark (MIDDLE) 2015 MAR -5 PM 12:38 Richard

1. Office, Agency, or Court

Agency Name (Do not use acronyms) Superior Court of California, County of San Mateo  
Division, Board, Department, District, if applicable  
Your Position Superior Court Judge

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

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 \_\_\_\_\_

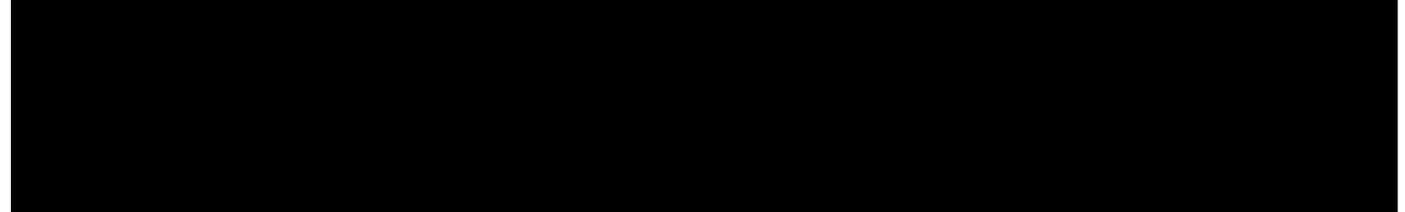
3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2014, through December 31, 2014.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- or-  The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2014.  The period covered is January 1, 2014, 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."  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 2-26-2015 (month, day, year)

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
 (Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
Mark R. Forcum

**1. BUSINESS ENTITY OR TRUST**

Name GMJK LLC

Address (Business Address Acceptable) 400 Poplar Ave Milbrae CA 94030

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS  
Rental Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 3/20/14  
terminated

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  LLC Other

YOUR BUSINESS POSITION 1/6<sup>th</sup> owner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

None or  Names listed below

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY GMJK owned:

3732 and 3730 Cabrillo St, San Francisco CA 94121

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
Rental Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 3/20/14  
terminated

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold 1/6<sup>th</sup> owner  Other

Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

Name Mark R. Forcum

Address (Business Address Acceptable) 3732 x 3730 Cabrillo St, San Francisco CA, 94121

Check one  
 Trust, go to 2  Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS  
Rental Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$0 - \$1,999  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 1/14  
NAF

NATURE OF INVESTMENT  
 Partnership  Sole Proprietorship  Other

YOUR BUSINESS POSITION 1/6<sup>th</sup> owner

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499  \$10,001 - \$100,000  
 \$500 - \$1,000  OVER \$100,000  
 \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

None or  Names listed below

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT  REAL PROPERTY

3732 x 3730 Cabrillo St, San Francisco CA, 94121

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
Rental Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED 1/14 DISPOSED 1/14  
NAF

NATURE OF INTEREST  
 Property Ownership/Deed of Trust  Stock  Partnership  
 Leasehold 1/6<sup>th</sup> owner  Other

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
*Mark R. Forcum*

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
*3732 and 3730 Cabrillo St.*

CITY  
*San Francisco CA 94121*

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

IF APPLICABLE, LIST DATE:  
 ACQUIRED *1/14* DISPOSED *1/14*

NATURE OF INTEREST  
 Ownership/Deed of Trust  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining \_\_\_\_\_ Other \_\_\_\_\_

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None  
*\* GMJK LLC was a family LLC  
I was a 1/6<sup>th</sup> owner of GMJK LLC, which terminated 3-20-2014*

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
*3732 and 3730 Cabrillo St.*

CITY  
*San Francisco CA 94121*

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

IF APPLICABLE, LIST DATE:  
 ACQUIRED *1/14* DISPOSED *1/14*

NATURE OF INTEREST  
 Ownership/Deed of Trust *1/6<sup>th</sup> owner*  Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining \_\_\_\_\_ Other \_\_\_\_\_

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499  \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\* You are not required to report loans from commercial lending institutions 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\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %  None TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

INTEREST RATE \_\_\_\_\_ %  None TERM (Months/Years) \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  \$1,001 - \$10,000  
 \$10,001 - \$100,000  OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

**SCHEDULE D  
Income - Gifts**

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
*Mark R. Forcum*

▶ NAME OF SOURCE (Not an Acronym)  
*San Francisco 49ers*

ADDRESS (Business Address Acceptable)  
*4949 Centennial Blvd Santa Clara*

BUSINESS ACTIVITY, IF ANY, OF SOURCE *CA, 95054*  
*OWN NFL football team*

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<i>8/17/2014</i>	<i>300.00</i>	<i>2 preseason tickets parking pass.</i>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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)  
*San Mateo County Bar Association*

ADDRESS (Business Address Acceptable)  
*333 Bradford St, Suite 200*

BUSINESS ACTIVITY, IF ANY, OF SOURCE *Redwood City CA, 94063*  
*Lawyers Association*

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<i>9/29/2014</i>	<i>65<sup>00</sup></i>	<i>Barristers Lunch</i>
<i>12/11/2014</i>	<i>65<sup>00</sup></i>	<i>Women Lawyers Lunch</i>
___/___/___	\$ _____	_____

▶ 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)  
*San Mateo County Trial Lawyers Association*

ADDRESS (Business Address Acceptable)  
*Po Box 752, San Carlos CA, 94070*

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
*Lawyer Association*

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<i>10/30/2014</i>	<i>105<sup>00</sup></i>	<i>Dinner</i>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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: \_\_\_\_\_