

CG

COVER PAGE

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SUPERIOR COURT
CHAMBERS

Please type or print in ink.

NAME OF FILER (LAST) MARIGONDA (FIRST) PAUL (MIDDLE) MARIO
15 FEB 25 PM 1:14

1. Office, Agency, or Court

Agency Name (Do not use acronyms) SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CRUZ
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 SANTA CRUZ
 City of _____ Other _____

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

Annual: The period covered is January 1, 2014, through December 31, 2014.
-or-
The period covered is _____, through December 31, 2014.
 Assuming Office: Date assumed _____
 Leaving Office: Date Left _____ (Check one)
 The period covered is January 1, 2014, 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: 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

5. [Redacted]

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

Date Signed February 25, 2015
(month, day, year)

SCHEDULE D
Income - Gifts

Name
PAUL MARIGONDA

▶ NAME OF SOURCE (Not an Acronym)
TYLER TECHNOLOGIES
 ADDRESS (Business Address Acceptable)
5101 HUNYSON BLVD, PLANO, TX 75074
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
INFORMATION TECHNOLOGY

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09.02.14</u>	<u>\$150.00</u>	<u>DINNER</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)
ANDERS TURGERSON
 ADDRESS (Business Address Acceptable)
258 MAIN ST, LOS GATOS, CA. 95030
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
PRODUCT MANAGER, ADOBE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09.27.14</u>	<u>\$50.00</u>	<u>CAL FOOTBALL TICKETS</u>
<u>10.11.14</u>	<u>\$50.00</u>	<u>CAL FOOTBALL TICKETS</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)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

▶ 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)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

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ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

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ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: _____