

HUMAN RESOURCES OFFICE  
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COVER PAGE

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2015 FEB 24 PM 12:08

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MORTON MIRIAM I

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

SUPERIOR COURT OF CALIFORNIA

Division, Board, Department, District, if applicable

SAN BERNARDINO COUNTY, VICTORVILLE

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."

► Total number of pages including this cover page: 4

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 2/18/15  
(month, day, year)

ORIGINAL

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FAIR POLITICAL  
PRACTICES COMMISSION  
2015 MAR 02 AM 11:04

**SCHEDULE A-1**  
**Investments**  
**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)  
Do not attach brokerage or financial statements.

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small> Name <b>MIRIAM I MORTON</b>
--

▶ NAME OF BUSINESS ENTITY  
**BANC ONE**

GENERAL DESCRIPTION OF THIS BUSINESS  
**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:  
\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**MEDTRONIC**

GENERAL DESCRIPTION OF THIS BUSINESS  
**MEDICAL**

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:  
\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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

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\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
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\_\_\_\_/\_\_\_\_/14      \_\_\_\_/\_\_\_\_/14  
ACQUIRED      DISPOSED

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



