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SUPERIOR COURT OF CALIFORNIA  
COUNTY OF ORANGE FILING  
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CALIFORNIA FORM 700  
FAIR POLITICAL PRACTICES COMMISSION  
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STATEMENT OF ECONOMIC INTERESTS

CG

COVER PAGE

Please type or print in ink.

ALAN CARLSON, Clerk of the Court

NAME OF FILER (LAST) ROBBINS (FIRST) ROGER (MIDDLE) BROWN  
BY: [Signature]

1. Office, Agency, or Court

Agency Name (Do not use acronyms) SUPERIOR COURT, COUNTY OF ORANGE  
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
- Multi-County \_\_\_\_\_
- City of \_\_\_\_\_
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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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: 1

- 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.

I have been an responsible caregiver in preparing this statement 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 California

Date Signed 2/3/15  
(month, day, year)