CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT Please type or print in link.	STATEMENT OF ECON FAIROUVEROP PRACTICES COMM		はいには、 「EB - 1 2012 Compared Received FEB - 1 2012 Compared Received IOR COURT OF CALIFORN HUMAN RESOURCES
NAME OF FILER (LAST) UNGER	12 MAR - 7 AM	P05	(MIDDLE) RIGGINS
1. Office, Agency, or Court	OTTERA		
Agency Name			
SOLANO COUNTY SUPERIOR COU			
Division, Board, Department, District, if applicable		Position	
JUDICIAL OFFICE NO. 2 (DEPT. 5)	SL	JPERIOR COURT JUDGE	
 If filing for multiple positions, list below or on a 	n attachment.		
Agency:	Pos	ition:	
2. Jurisdiction of Office (Check at least of	ne box)		
X State	Juc 🗙	dge or Court Commissioner (Statew	vide Jurisdiction)
Multi-County	Co	unty of	
City of		ner	
Annual: The period covered is January 1, 21 December 31, 2011. "O" The period covered is December 31, 2011. Assuming Office: Date assumed Candidate: Election Year Aschedule Summary	(C	eaving Office: Date Left/_ The period covered is January 1, leaving office. The period covered is/ the date of leaving office. art 1:	2011, through the date of
Check applicable schedules or "None."	 Total number 	of pages including this cou	/er page: <u>3</u>
Schedule A-1 - Investments - schedule attac	ned Schedul	le C - Income, Loans, & Business	Positions - schedule attached
Schedule A-2 - Investments - schedule attac		le D - Income - Gifts - schedule a	
Schedule B - Real Property – schedule attac	-or-	ie E - Income - Gifts - Travel Pay	ments - schedule attached
	ana Na canartshia intoracte an sau i	vhadula	
5. V There used all reasonable diligence in preparing therein and in any attached schedules is true and			
I certify under penalty of perjury under the law	s of the State of California that th		
Date Signed	Signat ure .		

FPPC Form 700 (2011/2012) FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts



(Ownership Interest is 10% or Greater)

CYNDA RIGGINS UNGER

1. BUSINESS ENTITY OR TRUST ▶ 1. BUSINESS ENTITY OR TRUST R&N HUBBARD, UNGER & URQUHART Name 525 MERCHANT STREET, VACAVILLE, CA 95688 525 MERCHANT STREET, VACAVILLE, CA 95688 Address (Business Address Acceptable) Address (Business Address Accentable) . Check one Check_one Trust, go to 2 Business Entity, complete the box, then go to 2 Trust, go to 2 X Business Entity, complete the box, then go to 2 GENERAL DESCRIPTION OF BUSINESS ACTIVITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY FAIR MARKET VALUE IF APPLICABLE, LIST DATE: FAIR MARKET VALUE IF APPLICABLE LIST DATE: \$0 - \$1,999 \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$100,000 \$100,001 - \$1,000,000 1_ / 11 / 11 1 / 11 1 1 / 11 \$2,000 - \$10,000 ACQUIRED DISPOSED ACQUIRED DISPOSED \$10,001 - \$100,000 × \$100.001 - \$1,000.000 Over \$1,000,000 Over \$1,000.000 NATURE OF INVESTMENT NATURE OF INVESTMENT Sole Proprietorship X Partnership Sole Proprietorship X Partnership Othe YOUR BUSINESS POSITION SEE "COMMENTS" BELOW * YOUR BUSINESS POSITION SEE "COMMENTS" BELOW* 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) × \$10,001 - \$100,000 X \$10,001 - \$100,000 \$0 - \$499 \$0 - \$499 OVER \$100,000 \$500 - \$1,000 OVER \$100,000 \$500 - \$1.000 \$1 001 - \$10 000 \$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) 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.) Aggregate rental income paid by tenant, law firm of Community property share of spouse's income from law Hubbard, Unger & Urguhart. practice and spouse's interest in the law firm. 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST Check one box: Check one box: INVESTMENT REAL PROPERTY INVESTMENT REAL PROPERTY Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property Description of Business Activity or Description of Business Activity or City or Other Precise Location of Real Property City or Other Precise Location of Real Property FAIR MARKET VALUE IF APPLICABLE LIST DATE: FAIR MARKET VALUE IF APPLICABLE. LIST DATE: \$2,000 - \$10,000 \$2,000 - \$10,000 / 11 _ / 11 / 11 \$10 001 - \$100,000 1 \$10,001 - \$100,000 ACQUIRED DISPOSED ACQUIRED DISPOSED \$100.001 - \$1.000.000 \$100.001 - \$1.000.000 Over \$1,000,000 Over \$1,000,000 NATURE OF INTEREST NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership Property Ownership/Deed of Trust Stock Partnership Leasehold _______ Yrs. remaining Leasehold _____ Other ____ Other ____ Check box if additional schedules reporting investments or real property are attached Check box if additional schedules reporting investments or real property are attached

Comments: *All intrsts.herein are thru com.prop.intrst. in sps.'s p'ship

FPPC Form 700 (2011/2012) Sch. A-2 FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SC	HE	DULE	ΕВ	
Interests	in	Real	Proper	ty



(Including Rental Income)

Name
CYNDA RIGGINS UNGER

 ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 525 MERCHANT STREET 	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY VACAVILLE, CA 95688	СПУ
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$ 32,000 - \$10,000 /11 /11 \$ 100,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000 ACQUIRED DISPOSED
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
▼ \$10,001 - \$100,000 □ OVER \$100,000	S10,001 - \$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.	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.
HUBBARD, UNGER & URQUHART (LAW OFFICE BUILDING)	

* 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*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable

Comments: _

FPPC Form 700 (2011/2012) Sch. B FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

FAIR POLITICAL PRACTICES COMMISSION	
Please type or print in ink.	HUMAN RESOURCES
NAME OF FILER (LAST) 2013 MAR - 6	6 Přidlesnu i (MIDDLE)
UNGER CYNDA	RIGGINS
1. Office, Agency, or Court	
Agency Name SOLANO COUNTY SUPERIOR COURT	······
Division, Board, Department, District, if applicable	Your Position
JUDICIAL OFFICE NO. 2 (DEPT. 5)	SUPERIOR COURT JUDGE
 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)	Leaving Office: Date Left
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."	I number of pages including this cover page: <u>3</u>
Schedule A-2 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached Schedule D - Income – Gifts – schedule attached Schedule E - Income – Gifts – Travel Payments – schedule attached
None - No reportable intere	ests on any schedule
herein and in any attached schedules is true and complete. I ack	
I certify under penalty of perjury under the laws of the State	
Date Signed 02/04/2013	
(month, day, year)	

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FPPC Form 700 (2012/2013) FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

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(Ownership Interest is 10% or Greater)

CYNDA RIGGINS UNGER

1. BUSINESS ENTITY OR TRUST	1. BUSINESS ENTITY OR TRUST
R&N	Hubbard, Unger & Urquhart
Name	Name
525 Merchant Street, Vacaville, CA 95688 Address (Business Address Acceptable)	525 Merchant Street, Vacaville, CA 95688
Address (Business Address Address Address) Check one	Address (Business Address Acceptable) Check one
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 I Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
S2,000 - \$10,000/ 12/ 12	\$2,000 - \$10,000
\$10,001 - \$100,000 ACQUIRED DISPOSED	S10,001 - \$100,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Partnership Sole Proprietorship	Partnership Sole Proprietorship
See "Comments" Below**	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION See "Comments" Below**
 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
S0 - \$499 S10.001 - \$100.000	S0 - \$499 S10.001 - \$100.000
S500 - \$1,000 OVER \$100,000	S500 - \$1,000 OVER \$100,000
\$1,001 - \$10,000	s1,001 - \$10,000
 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Arach a separate sheet if necessary) 	 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Atlach a separate street if necessary)
None	None
Aggregate rental income paid by tenant, law firm of	Community property share of spouse's income from law
Hubbard, Unger & Urquhart.	practice and spouse's interest in the law firm.
4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S10,001 - \$100,000	S10.001 - \$100,000
Over \$1,000,000	Cver \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments: **All ints. herein are thru com. prop. ints. in sp.'s	p'ship FPPC Form 700 (2012/2013) Sch. A-2

FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS <u>525 Merchant Street CTY Vacaville, CA 95688 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: 12 2000 - \$10000 122 122 J1000 - \$1000,000 ACQUIRED DISPOSED Over \$1,000,000 NATURE OF INTEREST OwnershipDeed of Trust Lessended Ys.remaining Other Other </u>	FORNIA FORM / UU DUITICAL PRACTICES COMMISSION
IF REKIAL PROPERTY CROSS INCOME ERCEVED IF REKIAL PROPERTY CROSS INCOME Sto 5499 5500 51,000 Sto 1000 OVER \$100,000 SOURCES OF REXIAL INCOME: If you own a 10% or greater interest. If is the name of each tenant that is a single source of income of \$10,000 or more. Hubbard, Unger & Urguhart (Law Office Building) None	APPLICABLE, LIST DATE: 12J2_ ACQUIREDJ2_ DISPOSED

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*	NAME OF LENDER'
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% 🗋 None	% None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	. \$10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable

Comments:

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FPPC Form 700 (2012/2013) Sch. B FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

CALIFORNIA FORM 7000 FAIR POLITICAL PRACTICES COMINSION A PUBLIC DOCUMENT Please type or print in link. MARE OF FAIR (AST)	CG	ECONOMIC	
UNGER	CYNDA		RIGGINS
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
SUPERIOR COURT OF CALIFOR	NIA, COUNTY OF SOL	ANO	
Division, Board, Department, District, if applic	able	Your Position	
JUDICIAL OFFICE NO. 2 (DEPT.	5)	SUPERIOR	COURT JUDGE
 If filing for multiple positions, list below or 	on an attachment. (Do not use	acronyms)	
Agency:		Position:	- <u></u>
2. Jurisdiction of Office (Check at lea	st one box)		
State		Judge or Cou	rt Commissioner (Statewide Jurisdiction)
Multi-County		County of	
City of			
3. Type of Statement (Check at least o			
 Annual: The period covered is January December 31, 2014. -or- The period covered is/_December 31, 2014. Assuming Office: Date assumed 	, through	(Check one) O The perior leaving of O The perior	ce: Date Left / d covered is January 1, 2014, through the date of fice. d covered is, through of leaving office.
Candidate: Election year	and office sought, if d	ifferent than Part 1: _	-
	attached	Schedule C - Incol Schedule D - Incol Schedule E - Incol	including this cover page: 3 me, Loans, & Business Positions – schedule attached me – Gifts – schedule attached me – Gifts – Travel Payments – schedule attached
5. herein and in any attached schedules is true I certify under penalty of perjury under the Date Signed <u>02/24/2015</u> (more, day, year)			ERPC Form 200 (2014/2015)

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FPPC Form 700 (2014/2015) FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE A-2 Inv stm nts, Incom , and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)



CYNDA RIGGINS UNGER

1. BUSINESS ENTITY OR TRUST	1. BUSINESS ENTITY OR TRUST
	JON N. UNGER, ATTORNEY AT LAW
Name Address (Business Address Acceptable)	Name 525 MERCHANT STREET, VACAVILLE, CA 95688 Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS LAW PRACTICE, SOLE PROPRIETORSHIP
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: 94.00.151000 114 95.00.1510000 114 910001-\$100000 100000 9100001-\$100000 0100000 9100001-\$100000 0100000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: 90:05:10:000 1_14 92:000:10000 114 91:0001:100:000 114 91:0001:100:000 100 91:0000:1000 100 91:0000:1000 000
NATURE OF INVESTMENT Partnership Sole Proprietorship	NATURE OF INVESTMENT
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ OVER \$100,000 □ \$1,001 - \$10,000	S0 - \$499
3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Amath a separate sheet if necessary) None or	3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if increasing) None or Names listed below
	Community property share of spouse's income from law practice and spouse's interest in the law firm.*
 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one hox; 	 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST Check one box;
INVESTMENT REAL PROPERTY	
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2:00 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: 12:00:0:1:510,000 _/14 10:00:1:510,000 _/_144 10:00:0:1:510,000 ACQUIRED DisPOSED OISPOSED
NATURE OF INTEREST	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments: *All intrst herein are thru com.prop.intrst in spou	ISB'S law FPPC Form 700 (2014/2015) Sch. A-2 FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDU Interests in Re (Including Rent	al Property
► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
525 MERCHANT STRET	
СПТҮ	CITY
VACAVILLE, CA 95688	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: □ 22,000 - \$10,000 14 14 ○ 100,000 - \$1,000,000 ACQUIRED DISPOSED ○ Over \$100,000 Output DISPOSED	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 114 \$10,001 - \$100,000 114 \$100,001 - \$100,000 114 \$00,001 - \$100,000 1500 Ores \$100,000 1500
NATURE OF INTEREST	NATURE OF INTEREST
Leasehold Densembling Other	Leasehold Green
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
50 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000	S10,001 - \$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.	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.
JON N. UNGER, ATTORNEY AT LAW	
(LAW OFFICE BUILDING)	
* You are not required to report loans from commercial lo	anding institutions made in the lender's regular course of

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*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
% 🔲 None	% 🔲 None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	Guarantor, if applicable

Comments: ___

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FPPC Form 700 (2014/2015) Sch. B FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

A PUBLIC DOCUMENT	CO	VER PAGE	UV) JAN 26 2016
lease type or print in ink.			SUPERIOR COURT OF CALIF
ME OF FILER (LAST)	(FIRST)	·	HUMAN RESOURCES
INGER	CYNDA		RIGGINS
Office, Agency, or Court			
Agency Name (Do not use acronyms)			
SUPERIOR COURT OF CALIFORNIA	, COUNTY OF SOLA		
Division, Board, Department, District, if applicable		Your Position	
JUDICIAL OFFICE NO. 2 (DEPT. 5)		SUPERIOR COURT J	UDGE
 If filing for multiple positions, list below or on an 	attachment. (Do not use a	scronyms)	
Agency:		Position:	
. Jurisdiction of Office (Check at least on	e bax)		
State		🖌 Judge or Court Commission	er (Statewide Jurisdiction)
Multi-County		County of	
City of		Other	
<u> </u>			
Type of Statement (Check at least one bo	x)		
Annual: The period covered is January 1, 20 December 31, 2015.	15, through	Leaving Office: Date Left (Check one)	//
-or- The period covered is/ December 31, 2015.	/, through	 The period covered is J leaving office. 	anuary 1, 2015, through the date of
Assuming Office: Date assumed/		 The period covered is _ the date of leaving offic 	
Candidate: Election year	and office sought, if di	fferent than Part 1:	
			-
. Schedule Summary (must complete) ► Total number o	of pages including this cove	r page: <u>3</u>
Schedules attached			
Schedule A-1 - Investments - schedule att	ached 🗌 /	Schedule C - Income, Loans, & Bu	siness Positions - schedule attached
Schedule A-2 - Investments – schedule att	ached 📋	Schedule D - Income - Gifts - sch	edule attached
Schedule B - Real Property - schedule att	ached 🗌 🗄	Schedule E - Income - Gifts - Trai	vel Payments - schedule attached
or-			
•OF- None - No reportable interests on an	v schedule		
		is is	
FT None • No reportable interests on an	omplete. I acknowledge th		
None - No reportable interests on an None - No reportable interests on an herein and in any stached schedules is fine and c	omplete. I acknowledge th s of the State of California		

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts



(Ownership Interest is 10% or Greater)

1 BUSINESS ENTITY OR TRUST	1. BUSINESS ENTITY OR TRUST
	JON N. UNGER, ATTORNEY AT LAW
Name	Name 525 MERCHANT STREET, VACAVILLE, CA 95688
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one	Check ane
Trust, go to 2 Business Entity, complete the box, then go to 2	Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE IF APPLICABLE, LIST DATE 56 - 31,699 1_15 51,000 - 10,000 115 510,001 - 10,000 0000 510,001 - 31,000,000 0000 510,001 - 31,000,000 0000	FAR MARKET VALUE IF APPLICABLE, LIST DATE \$0 - \$1999 \$2,000 - \$10,000 \$2,000 - \$10,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Partnership Sole Propretorship
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
2. IDENTIFY THE GROSS INCOME RECEIVED IINCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME IQ THE ENTITY/TRUSTI	 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 \$560 - \$1,000 OVER \$100,000 \$1,001 - \$10,000 OVER \$100,000	S0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 \$100,000 \$100,000
3 LIST THE NAME OF BACH REPORTABLE SINGLE SOURCE OF INCODE OF 510 000 OR MAKE	S LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF NEORE OF 5100 OF MORE Induce repart wat rejective: None or □ Names lated below Community property share of spouse's income from law practice and spouse's interest in the law firm*
INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST	 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST
Check one box	Check one box Check one box REAL PROPERTY
Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE 19:00:10:10:000 _/15 19:00:10:10:000 _/15 19:00:01:10:000 _/15 19:00:01:000 _/15 0:00:01:000 _/15	FAR MARKET VALUE IF APPLICABLE, LIST DATE 15:000 10:000 15:000 10:001 10:001 10:001 10:001 10:001 10:001 10:001 10:001 10:001 10:001 10:001
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST
Lesschold Other	Leasehold Other
The remaining Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments: *All int. is thru com.prop.int. in spouse's law pra	ctice FPPC Form 700 (2015/2016) Sch. A-2

FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B			
Interests in Real Property			



(Including Rental Income)

CYNDA RIGGINS UNGER

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 525 MERCHANT STREET	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY	CITY
VACAVILLE, CA 95688	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE 12:000 - \$100,000	FAIR MARKET VALUE IF APPLICABLE. LIST DATE \$3,000 - \$10,000 15 \$10,000 15 \$10,000 15 \$100,000 15 \$100,000 15 Over \$100,000 ACQUIRED DisPOSED DISPOSED
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Cother
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$498 \$500 - \$1,000 \$1,001 - \$10,000
ØVER \$100,000 □ GVER \$100,000	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.	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.
	L_ None
JON N. UNGER, ATTORNEY AT LAW (LAW OFFICE BUILDING)	
· · · · · · · · · · · · · · · · · · ·	·····

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 require course of business must be disclosed as follows:

NAME OF LENDER"	NAME OF LENDER*	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER	
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)	
% None	% None	
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD	
\$500 - \$1,000	\$1,001 - \$10,000	
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000	
Guarantor, if applicable	Guarantor, if applicable	

Comments:

CALIFORNIA FORM 700

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

A PUBLIC	C DOCUMENT	COVER PAGE	Filed Date: 01/23/2017 09:25 AM SAN: FPPC
Please type or pri	nt in ink.		SAN. FFFC
NAME OF FILER (LA	ST)	(FIRST)	(MIDDLE)
Unger		Cynda	R
1. Office, Age	ncy, or Court		
Agency Name	(Do not use acronyms)		
Solano Cou	inty Superior Court		
Division, Board,	Department, District, if applicable	Your Position	
		Judge	
► If filing for m	ultiple positions, list below or on an attachme	ent. (Do not use acronyms)	
Agency:		Position:	
2. Jurisdiction	n of Office (Check at least one box)		
State		X Judge or Court Co	mmissioner (Statewide Jurisdiction)
Multi-County		County of	
3. Type of Sta	atement (Check at least one box)		
	he period covered is January 1, 2016, throug lecember 31, 2016.	h Leaving Office: (Check one)	Date Left/
	he period covered is////	, through O The period cover leaving office.	vered is January 1, 2016, through the date of
Assuming	Office: Date assumed//		vered is/, through aving office.
Candidate:	Election year and o	office sought, if different than Part 1:	,
4. Schedule S	Summary (must complete) 🕨 T	otal number of pages including th	nis cover page:1
Schedules		, •	
C Schedu	le A-1 - Investments - schedule attached	Schedule C - Income. Los	ans, & Business Positions - schedule attached
	le A-2 - Investments - schedule attached	Schedule D - Income - G	
Schedu	le B - Real Property - schedule attached	Grand Schedule E - Income - G	ifts - Travel Payments - schedule attached
-or-			
× None -	No reportable interests on any sched	ule	
5. Verification			
MAILING ADDRESS (Business or Agenc	S STREET y Address Recommended - Public Document)	CITY	STATE ZIP CODE
DAYTIME TELEPHO	DNE NUMBER	E-MAIL ADDRESS	
	reasonable diligence in preparing this stateme ny attached schedules is true and complete.		e best of my knowledge the information contained
I certify under	penalty of perjury under the laws of the S	tate of California that the foregoing is tru	ue and correct.
Date Signed	01/23/2017 09:25 AM	Signature .	
	(month, day, year)		riginally signed statement with your filing official.)
			EPPC Form 700 (2016/2017)

FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

CALIFORNIA FORM 700

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

A PUBLIC DOCUMENT	C	OVER PAGE	Filed Date: 01/18/2018 10:37 Al SAN: FPPC
Please type or print in ink.			SAN. TETO
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Unger	Cynda		R
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Solano County Superior Court			
Division, Board, Department, District, if applicable		Your Position	
		Judge	
 If filing for multiple positions, list below or on an a 	attachment. (Do not u	se acronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at least one	box)		
State		X Judge or Court Co	mmissioner (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, 201 December 31, 2017.	7, through	Leaving Office: (Check one)	Date Left//
-or- The period covered is//. December 31, 2017.	, through	 The period co leaving office. -or- 	vered is January 1, 2017, through the date of
Assuming Office: Date assumed/	1		vered is// through aving office.
Candidate: Date of Election	and office sough	t, if different than Part 1:	
4. Schedule Summary (must complete)	► Total numbe	r of pages including th	nis cover page: 1
Schedules attached			
Schedule A-1 - Investments - schedule atta	ched [Schedule C - Income I o	ans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule atta	ched [Schedule D - Income - G	
Schedule B - Real Property – schedule atta	ched [Schedule E - Income – G	ifts - Travel Payments - schedule attached
-or-			
X None - No reportable interests on any	schedule		
5. Verification			
MAILING ADDRESS STREET	CITY		STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)			
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS	
I have used all reasonable diligence in preparing this herein and in any attached schedules is true and co			e best of my knowledge the information containe
I certify under penalty of perjury under the laws			ue and correct.
Date Signed01/18/2018 10:37 AM	,	Signature	
(month, day, year)			riginally signed statement with your filing official.)
			FPPC Form 700 (2017/20:

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