



APR 02 2014

CITY OF PORTERVILLE
CITY CLERK OFFICE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST)
HAMILTON CAMERON J

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Porterville

Division, Board, Department, District, if applicable

City Council

Your Position

Member

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

Agency: see attached

Position:

2. Jurisdiction of Office (Check at least one box)

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of Tulare

City of Porterville

Other _____

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

Annual: The period covered is January 1, 2013, through December 31, 2013.

Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2013.

The period covered is January 1, 2013, 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: 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

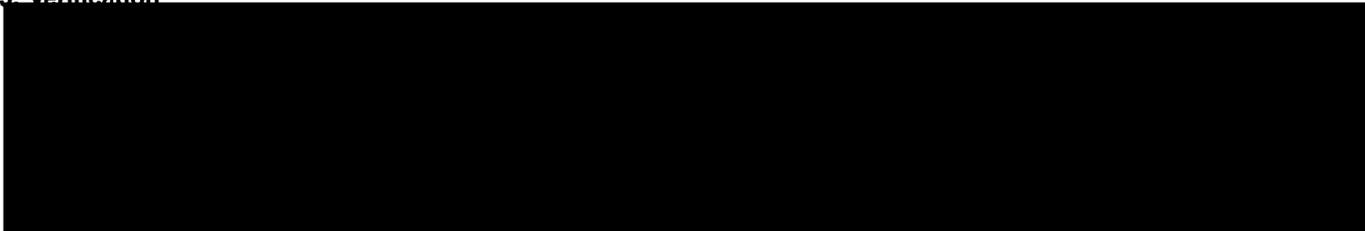
Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification



I certify under penalty of perjury under the laws of the State of

Date Signed 04/02/2014
(month, day, year)

RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
2014 APR 11 PM 4:17

1. Office, Agency, or Court (Continued)

Agency Name: City of Porterville
Division Board, Department, District, if applicable: Successor Agency to Porterville
Redevelopment Agency; Porterville
Public Improvement Corp.; Porterville
Public Finance Authority; Porterville
Planning Commission

Position: Member

Agency Name: Tulare County Local Agency Formation
Commission; Tulare County Economic
Development Corporation

Position: Member

Agency Name: Tulare County Association of
Governments; Tulare County
Transportation Authority

Position: Alternate Member

SCHEDULE D
Income – Gifts

Name
 Hamilton, Cameron J.

▶ NAME OF SOURCE (Not an Acronym)
 Julia Lew

ADDRESS (Business Address Acceptable)
 1220 W. Main Street, Visalia, CA 93291

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 City Attorney

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 04 / 13	\$ 72.23	Dinner
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ 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)
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ 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)
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____
__ / __ / __	\$ _____	_____

▶ 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: _____