



2014 MAR 26 PM 2:20

Please type or print in ink.

NAME OF FILER (LAST) Hampton (MIDDLE) John  
David

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Rio Vista City Council

Division, Board, Department, District, if applicable

City of Rio Vista

Your Position

Member, City Council

CITY OF RIO VISTA  
FEB 13 2014  
OFFICE OF THE CITY CLERK

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

Agency: Rio Vista Successor Agency

Position: Board Member

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County \_\_\_\_\_

County of \_\_\_\_\_

City of Rio Vista

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: 2

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. Signature  
[Redacted Signature Area]

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Date Signed 02/12/2014  
(month, day, year)

