

STATEMENT OF ECONOMIC INTERESTS



COVER PAGE

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MAR 19 2014
Official Use Only

CITY CLERK
CITY OF VISTA, CA

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
RITTER, JUDY k.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Vista, Mayor; Buena Sanitation District, Chairperson; Encina Wastewater Authority, Board Member; San

Diego Association of Government SANDAG, Board Member;

Your Position

SANDAG Transportation Committee Vice Chair;

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

Agency: North County Transit District

Position: Board Member Alternate

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

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County

County of San Diego

City of 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: 7

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

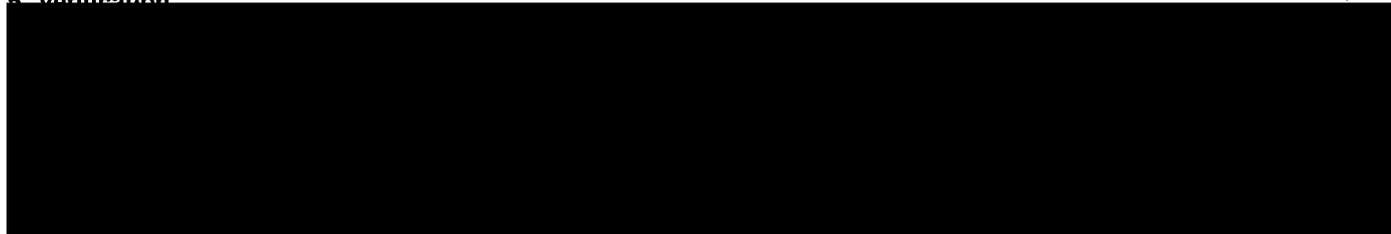
Schedule B - Real Property - schedule attached

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 03/19/2014 (month, day, year)

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CITY CLERK
CITY OF VISTA, CA

SCHEDULE D
Income - Gifts

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
 Mayor Judy Rlter

> NAME OF SOURCE
 Vista Firefighters IAAF Local 4107

ADDRESS
 PO Box 1119, Vista CA 92085-1119

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Fire Fighters Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 16 / 13	\$ 60.00	Holiday Gift Basket
	\$	
	\$	

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
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	\$	
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BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

> NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$	
	\$	
	\$	

Comments: _____

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CITY CLERK
CITY OF VISTA, CA

SCHEDULE D
Income - Gifts

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
 Mayor Judy Ritter

▶ NAME OF SOURCE
Deputy Sheriff Association
 ADDRESS (Business Address Acceptable)
13881 Danielson St
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Poway, CA 92064

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 19 / 13</u>	<u>\$ 30.00</u>	<u>holiday wine/chocolate</u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
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▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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▶ NAME OF SOURCE
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 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>
<u> / / </u>	<u>\$ </u>	<u> </u>

Comments: _____

CITY
 2013 JUN -2 PM 4: 22

**SCHEDULE D
 Income - Gifts**

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
Mayor Judy Ritter

▶ NAME OF SOURCE (Not an Acronym)
Moonlight Cultural Foundation

ADDRESS (Business Address Acceptable)
P.O. Box 2497 Vista CA 92085

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Opening Night of South Pacific/Sponsor Appreciation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 26 / 13	\$ 80.00	Dinner & Theatre
	\$	1 ticket for guest
	\$	

▶ 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)
	\$	
	\$	
	\$	

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BUSINESS ACTIVITY, IF ANY, OF SOURCE

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	\$	
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	\$	

▶ 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:

2013 MAY 22 11 13 30

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION
 Name
MAYOR JUDY RITTER

▶ NAME OF SOURCE (Not an Acronym)
VISTA FIRE FIGHTERS ASSOCIATION #4107

ADDRESS (Business Address Acceptable)
P.O. Box 1119, Vista, CA 92085

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fire Fighters - 2 TICKETS

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 16 / 13	\$ 250.00	Burn Institute Banquet
	\$	
	\$	

▶ 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)
	\$	
	\$	
	\$	

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ADDRESS (Business Address Acceptable)

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ADDRESS (Business Address Acceptable)

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Comments: _____