

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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COVER PAGE

APR - 5 2016

Please type or print in ink.

NAME OF FILER (LAST) CAND (FIRST) STEPHAN (MIDDLE) F

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

COSTA MESA SANITARY DISTRICT WASTEWATER MAINT. SUPERINTENDANT

Division, Board, Department, District, if applicable

Your Position

NA

► 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 SPECIAL DISTRICT

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

- Annual:** The period covered is January 1, 2015, through December 31, 2015.
- or-
- The period covered is _____, through December 31, 2015.
- Assuming Office:** Date assumed _____
- Candidate:** Election year _____ and office sought, if different than Part 1: _____
- Leaving Office:** Date Left _____ (Check one)
- The period covered is January 1, 2015, through the date of leaving office.
- or-
- The period covered is _____, through the date of leaving office.

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 1

Schedules attached

- 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. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

125 W 19TH COSTA MESA CA 92627

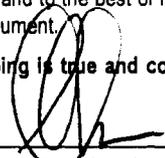
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

(949) 645-8400 SCAND@CMSD.CA.GOV

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

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

Date Signed 3/28/16
 (month, day, year)

Signature 
 (File the originally signed statement with your filing official.)