

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

COVER PAGE

Filed Date: 03/18/2016 08:50 AM
SAN: 041100024-STL-0024

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Carroll Scott C.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
Costa Mesa Sanitary District
Division, Board, Department, District, if applicable Your Position
General Manager

► 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 Judge or Court Commissioner (Statewide Jurisdiction)
 Multi-County _____ County of Orange
 City of _____ Other _____

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 ____/____/____
 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.
 Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 2

Schedules attached

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

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)
628 W. 19th Street Costa Mesa CA 92627-2716
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(949) 645-8400 ext:227 scarroll@cmsdca.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 03/18/2016 08:50 AM Signature Electronic Submission
(month, day, year) (File the originally signed statement with your filing official.)

SCHEDULE D
Income – Gifts

▶ NAME OF SOURCE *(Not an Acronym)*
CR&R Environmental Services
 ADDRESS *(Business Address Acceptable)*
11292 Western Avenue, Stanton, CA 90680
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Solid Waste Industry

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>09 / 22 / 15</u>	\$ <u>0</u>	<u>Dinner at Fandango in Pacific Grove</u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

▶ 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)
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

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<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

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<u> / / </u>	\$ <u> </u>	<u> </u>
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<u> / / </u>	\$ <u> </u>	<u> </u>
<u> / / </u>	\$ <u> </u>	<u> </u>

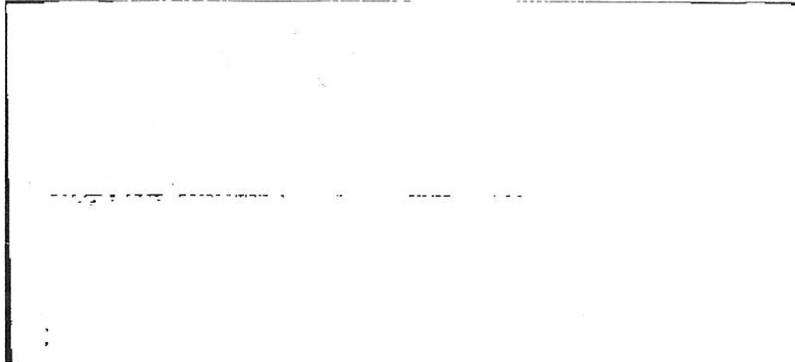
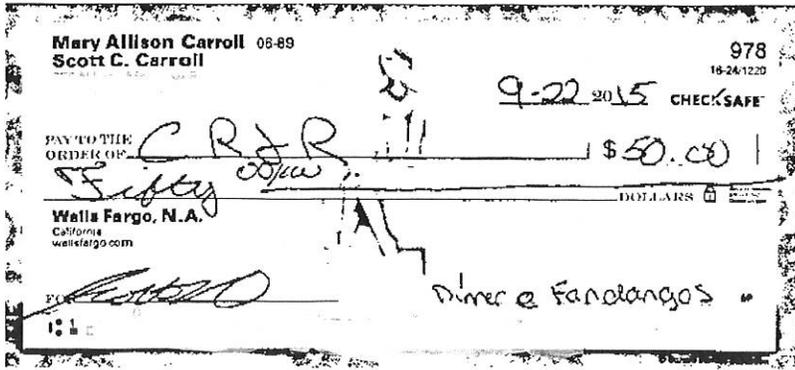
Comments: CR&R received a personal check for \$50.00. See attachment.



Wells Fargo Online®

View Check Copy

Check Number	Date Posted	Check Amount	Account Number
978	10/21/15	\$50.00	PMA XXXXXX4269



Equal Housing Lender

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