

**STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT**

Date Initial Filing Received
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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
SEAR SCOTT A

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
VALLEY SANITARY DISTRICT

Division, Board, Department, District, if applicable Your Position
DIVISION C DIRECTOR

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

Agency: VALLEY SANITARY DISTRICT Position: BUDGET & FINANCE AND COMMUNITY EI

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

- State
- Multi-County _____
- City of _____
- Judge, Retired Judge, Pro Tem 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, 2023, through December 31, 2023.
- Leaving Office:** Date Left ____/____/____ (Check one circle.)
- The period covered is January 1, 2023, through the date of leaving office.
- Assuming Office:** Date assumed ____/____/____
- Other -or-** The period covered is ____/____/____, through the date of leaving office.
- Candidate:** Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► 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
(Business or Agency Address Recommended - Public Document)
45500 VAN BUREN ST INDIO CA 92201

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(760) 238-5400 ssear@valley-sanitary.org

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 02/13/2024
(month, day, year)

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