

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

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Mendoza, Carlos Ernesto			

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

County of San Luis Obispo

Division, Board, Department, District, if applicable

Your Position

Cambria CSD

Facilities and Resources Officer

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

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)** State Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction) Multi-County \_\_\_\_\_ County of \_\_\_\_\_ City of \_\_\_\_\_ Other Cambria Community Services District**3. Type of Statement (Check at least one box)** **Annual:** The period covered is January 1, 2020 through December 31, 2020 **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2020

 The period covered is January 1, 2020 through the date of leaving office. **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_ 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 (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
<i>(Business or Agency Address Recommended - Public Document)</i>				
P.O. Box 65		Cambria	CA	93428
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS			
( 805 ) 927-6220	cmendoza@cambriacsd.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 02/23/2021  
 (month, day, year)

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