

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

City of Menifee  
City Clerk

Date Received  
Official Use Only  
MAR 27 2014

Received



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
MANN SCOTT ALAN

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

CITY OF MENIFEE

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

MAYOR

► 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 MENIFEE

- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- or-
- The period covered is 12 / 05 / 2012, through December 31, 2013.

- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
  - The period covered is January 1, 2013, through the date of leaving office.
  - The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

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: 5

- 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



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

Date Signed 03/27/2014  
(month, day, year)





**SCHEDULE D**  
**Income – Gifts**

Name  
**MANN, SCOTT ALAN**

▶ NAME OF SOURCE (Not an Acronym)  
**WASTE MANAGEMENT**

ADDRESS (Business Address Acceptable)  
**17700 INDIAN ST, MORENO VALLEY, CA 92551**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**RESIDENTIAL WASTE MANAGEMENT**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 13 / 13	\$ 200.00	PRES BUSH DINNER
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**OPTIMUS BUILDING CORPORATION**

ADDRESS (Business Address Acceptable)  
**239 ROSWELL AVENUE, LONG BEACH, CA 90803**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**COMMERCIAL DEVELOPER**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
SW 02 / 09 / 13	\$ 60.00	DINNER (SEE NOTE)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**WEST RIVERSIDE COUNCIL OF GOVERNMENTS**

ADDRESS (Business Address Acceptable)  
**4080 LEMON ST, 3RD FL, RIVERSIDE, CA 92501**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**CALIFORNIA JOINT POWERS AUTHORITY**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 13 / 13	\$ 200.00	SPOUSE DINNER
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**LEAGUE OF CALIFORNIA CITIES**

ADDRESS (Business Address Acceptable)  
**1400 K ST, STE 400, SACRAMENTO, CA 958214**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**CALIFORNIA CIVIC LEADERSHIP INSTITUTE**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 29 / 13	\$ 221.01	LODGING/MEALS
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**MARION ASHLEY FOR SUPERVISOR 2014**

ADDRESS (Business Address Acceptable)  
**3711-A ARLINGTON AVE, RIVERSIDE, CA 92506**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**POLITICAL CAMPAIGN**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 26 / 13	\$ 200.00	DODGER TICKET
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ NAME OF SOURCE (Not an Acronym)  
**USC ALUMNI ASSOCIATES**

ADDRESS (Business Address Acceptable)  
**UNIV PARK CAMPUS, LOS ANGELES, CA 90089**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**ALUMNI ASSOCIATION**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 14 / 13	\$ 275.00	TAILGATE / GAME
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

SW 2/20/13  
Comments: THE DINNER ON 2/20/13 ALSO INCLUDED DEPUTY MAYOR WALLACE EDGERTON AND MIKE ASHLEY, PARTNER IN ASHLEY-KROENCKE, LLC.

**SCHEDULE D  
Income – Gifts**

Name  
**MANN, SCOTT ALAN**

▶ NAME OF SOURCE (Not an Acronym)  
**ALESHIRE & WYNDER, LLP**

ADDRESS (Business Address Acceptable)  
**1881 VON KARMAN AVE, #1700, IRVINE, CA 92612**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**MUNICIPAL SERVICES LAW FIRM**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 19 / 13	\$ 53.79	DINNER (SEE NOTE)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)  
**WATT COMPANIES**

ADDRESS (Business Address Acceptable)  
**2716 OCEAN PARK BLVD, SANTA MONICA 90405**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**COMMERCIAL REAL ESTATE DEVELOPER**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 30 / 13	\$ 134.46	USC/UCLA TICKETS
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

▶ 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: THE DINNER ON 9/19/13 WAS A CLIENT DINNER CONDUCTED AT THE LEAGUE OF CALIFORNIA CITIES ANNUAL CONVENTION. CITY MANAGER ROB JOHNSON ALSO ATTENDED AS WELL AS OTHER CLIENT CITIES OF ALESHIRE & WYNDER.