

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

COVER PAGE

A PUBLIC DOCUMENT Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Edwards	Spencer	Wiles
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		
Groveland Community Services Distr	ict	
Division, Board, Department, District, if applicable	}	Your Position
Board of Directors		Director
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)		
Agency: Tuolumne-Stanislaus Integrat	ed Watershed Advis	Position: Director
2. Jurisdiction of Office (Check at least one box)		
State		☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
Multi-County Tuolumne and Stanislau	S	County of
City of		Other
3. Type of Statement (Check at least one	box)	
Annual: The period covered is January 1, 2 December 31, 2019.	•	Leaving Office: Date Left/
The period covered is 01 / 01 December 31, 2019.		The period covered is January 1, 2019, 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 then Part 1:		
4. Schedule Summary (must complete) ► Total number of pages including this cover page: Schedules attached		
Schedule A-1 - Investments - schedule at	Hanhad -	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule at	•	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property - schedule at	t	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- ☑ None - No reportable interests on any schedule		
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document	CITY	STATE ZIP CODE
18966 Ferretti Road	, Groveland	CA 95321
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS
(209)962-7161	5	sedwards@gcsd.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 fee going is true and correct.		
Date Signed		nature Day
(month, day, year)	٠.	(File the dispinally signed paper statement with your stang offices)