## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Please type or print in ink.

NA	ME OF FILER (LAST)  LIST A.		(FIRST)	on al de	(MIDDLE)	
1.	Office, Agency, or Court	Dear	-OMO F	hotelinul o	Hestenens	
	Agency Name Son Hwestelen College District					
	Division, Board, Department, District, if applicable  Office of Sunh	haha	Your Po	sition Éffektu	Uno no	
	▶ If filing for multiple positions, list below or on an attachment	1 7 - 0		0/		
	Agency:		Position	Dean, Offic Effectivene	e of Institutional	
2.	Jurisdiction of Office (Check at least one box)					
	☐ State		☐ Judge or Court Commissioner (Statewide Jurisdiction)			
	☐ Multi-County		County of			
			Other.	Dother Southwester Community Coll		
3.	Type_of Statement (Check at least one box)					
<b>(</b>	Annual: The period covered is January 1, 2011, throug December 31, 2011.	ıh		ng Office: Date Left k one)		
	The period covered is/			e period covered is Janua aving office.	ary 1, 2011, through the date of	
	Assuming Office: Date assumed 8 11 2011 O The period covered is, through the date of leaving office.					
	Candidate: Election Year Office sought, if different than Part 1:					
4.	Schedule Summary  Check applicable schedules or "None." ► Total number of pages including this cover page:					
	□ Schedule A-1 - Investments – schedule attached □ Schedule A-2 - Investments – schedule attached □ Schedule B - Real Property – schedule attached		. Schedule D	- Income - Gifts - sched	ness Positions – schedule attached lule attached I Payments – schedule attached	
	None - No reportable interests on any schedule					
5.	Verification					
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY		STATE	ZIP CODE	
	900 Otay Lakes Rd.	Chula	Vista	CA	91910	
	DAYTIME TELEPHONE NUMBER ( 619 ) 216-6614		E-MAIL ADDRESS	(OPTIONAL)		
	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.					
	l certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
	Date Signed 3-2/(month, day, year)		Signature	MACA (File the originally signed state	1 SUS Tient with your fighty official.)	