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

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

P	ease type or print in ink.				
N/	ME OF FILER (LAST)		(FIRST)		(MIDDLE)
Н	lensley	Linda		(G.
1.	Office, Agency, or Court				
	Agency Name (Do not use acronyms)				
	Southwestern Community College District				
	Division, Board, Department, District, if applicable		Your Position		
			Director, Instit	utional Rese	earch, Planning & Grants
	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		☐ Judge or Court C	Commissioner (S	tatewide Jurisdiction)
	Multi-County		County of	:	
	City of				nunity College District
	Only in		V Other		
3.	Type of Statement (Check at least one box)			•	*
	Annexal: The period covered is January 1, 2013, the December 31, 2013.	ough	Leaving Office: (Check one)	Date Left	
	The period covered is/	, through	 The period of leaving office 		ry 1, 2013, through the date of
	Assuming Office: Date assumed/		The period covered is, through the date of leaving office.		
	Candidate: Election year a	nd office sought, if di	ifferent 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 C - Income, Loans, & Business Positions – schedule attached				
	Schedule A-2 - Investments – schedule attached	<u></u>	Schedule D - Income		
	Schedule B - Real Property – schedule attached		Schedule E - Income - Gifts - Travel Payments - schedule attached		
	-07-				
✓ 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 Road	Chula Vista		CA	91910
	DAYTIME TELEPHONE NUMBER	i	-MAIL ADDRESS (OPTIONAL)		
	619) 421-6700 Ihensley@swccd.edu				
	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information con 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 03/26/2014	Sia	nature &Md	a It	nolly
	(month, day, year)	0		originally signed statem	ent with your filing offici اللخ