CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Received
Official Use Only

Please type or print in ink.

NAME OF FILER (LAST): ARNOLD (FIRST): DONNA (MIDDLE):

1. Office, Agency, or Court

Agency Name: Southwestern Community College District

Division, Board, Department, District, if applicable

Your Position: Dean, School of Arts & Comm.

▶ If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office *(Check at least one box)*

- ☐ State
- ☐ Multi-County _____
- ☐ City of _____
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☐ County of _____
- ☑ Other Southwestern Community College

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

☑ **Annual:** The period covered is January 1, 2011, through December 31, 2011.

-or-

The period covered is ___/___/_____, through December 31, 2011.

☐ **Assuming Office:** Date assumed ___/___/_____

☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

☐ **Leaving Office:** Date Left ___/___/_____
(Check one)

○ The period covered is January 1, 2011, through the date of leaving office.

○ The period covered is ___/___/_____, through the date of leaving office.

4. Schedule Summary

Check applicable schedules or "None."

▶ ***Total number of pages including this cover page:*** 1

- ☐ **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

MAILING ADDRESS (Business or Agency Address Recommended - Public Document): STREET 900 Otay Lakes Rd CITY Chula Vista STATE Ca ZIP CODE 91910

DAYTIME TELEPHONE NUMBER: (619) 482 6372

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.

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

Date Signed 3/28/12 *(month, day, year)*

Signature _____ *(File the originally signed statement with your filing official.)*