Date Received Official Use Only

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Please type or print in ink. NAME OF FILER (MIDDLE) (FIRST) (LAST)

	MEADOWS	MA	rK	COWARD	
1.	Office, Agency, or Court				
	Agency Name Southwestern Community College District	DE	AD- Soc. So	c. Bus + Huw	
	Division, Board, Department, District, if applicable	You	r Position		
	► If filing for multiple positions, list below or on an attach	ment.		2	
	Agency:	Pos	sition;		
2.	Jurisdiction of Office (Check at least one box)				
	☐ State	☐ Ju	dge or Court Commissioner	(Statewide Jurisdiction)	
	☐ Multi-County	Co	ounty of		
	City of		her Southwestern Con	nmunity College District	
3.	Type of Statement (Check at least one box)				
	Annual: The period covered is January 1, 2012, through December 31, 2012.		eaving Office: Date Left Check one)		
	The period covered is//	, through C	The period covered is January leaving office.	uary 1, 2012, through the date of	
	Assuming Office: Date assumed	12 0	The period covered is the date of leaving office.	/, through	
	Candidate: Election year an	d office sought, if different that	n Part 1:		
4.	Schedule Summary			- 1	
	Check applicable schedules or "None."	► Total number of	of pages including this	s cover page:	
	Schedule A-1 - Investments - schedule attached	☐ Schedul	le C - Income, Loans, & Bus	iness Positions - schedule attached	
Schedule A-2 - Investments - schedule attached		☐ Schedul	□ Schedule D - Income - Gifts - schedule attached		
	Schedule B - Real Property - schedule attached	☐ Schedul	e E = Income - Gifts - Trave	el Payments - schedule attached	
	None - No reportable interests on any schedule				
5.	Verification	7.			
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE	
	900 Otay Lakes Road	Chula Vista	CA	91915	
	DAYTIME TELEPHONE NUMBER	E-MAIL ADDRI	ESS (OPTIONAL)	1	
	(619) 421-6700				
		lave used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained arein and in any attached schedules is true and complete. I acknowledge this is a public document.			
	certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed 2.11,13 Signature M. E. Wedden Si				amend with your filling official 1	