## 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)		(FIRST)	(MIDDLE)
DERRI		CHRISTING	MARIC
1. Office, Agency, or Court			
Agency Name	(6.11.00.0)		
Southwestern Community College District	DE	EAN, HEC N Your Position	e & CCAC
Division, Board, Department, District, if applicable		Your Position	=======================================
► If filing for multiple positions, list below or on an attack	ment.	/ 1 - 114 UNITED	
Agency:		Position:	e de l'indication de l'indicat
2. Jurisdiction of Office (Check at least one box)			
State		☐ Judge or Court Commissioner (Sta	atewide Jurisdiction)
Multi-County		County of	= 100 (100 m)
City of		Other Southwestern Comm	
Li Oily VI			
3. Type of Statement (Check at least one box)			
Annual: The period covered is January 1, 2012, three December 31, 2012.	ough	Leaving Office: Date Left (Check one)	<i></i>
The period covered is/	, through	<ul> <li>The period covered is January leaving office.</li> </ul>	y 1, 2012, through the date of
Assuming Office: Date assumed	Office: Date assumed/, through the date of leaving office.		
Candidate: Election year ar	d office sought, if diff	ferent than Part 1:	<del></del> "
4. Schedule Summary	18 - 1804 515 - 18		· ·
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 ☐ Schedule D - Income - Gifts - schedule attached			
☐ Schedule B - Real Property - schedule attached		Schedule E - Income - Gifts - Travel F	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
900 Otay Lakes Road	Chula Vista	CA	91910
DAYTIME TELEPHONE NUMBER	E-1	MAIL ADDRESS (OPTIONAL)	
( 619 ) 482-6700			
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 / 14 / 13 Signature My Mu / Music			
/ (month, day, year)		(File the ofiginally signed statement	nt with your filing official.)