CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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Please type or print in ink. NAME OF FILER (MIDDLE) ROLOMITA nn 1. Office, Agency, or Court Agency Name (Do not use acronyms) Southwestern Community College District Division, Board, Department, District, if applicable Human Kesources ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) 2. Jurisdiction of Office (Check at least one box) ☐ Judge or Court Commissioner (Statewide Jurisdiction) ☐ State Multi-County ___ ☑ Other Southwestern Community College District City of ___ 3. Type of Statement (Check at least one box) Leaving Office: Date Left ____/___/_ Annual: The period covered is January 1, 2013, through (Check one) December 31, 2013. The period covered is 11 20, 13, through O The period covered is January 1, 2013, through the date of leaving office. December 31, 2013. Assuming Office: Date assumed 11 , 20, 13 O The period covered is ____/__ the date of leaving office. Candidate: Election year _____ and office sought, if different than Part 1: ____ 4. Schedule Summary ► Total number of pages including this cover page: __ Check applicable schedules or "None." Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached Schedule B - Real Property - schedule attached None - No reportable interests on any schedule 5. Verification STATE ZIP CODE CITY (Business or Agency Address Recommended - Public Document) 91910 CA Chula Vista 900 Otay Lakes Road E-MAIL ADDRESS (OPTIONAL) DAYTIME TELEPHONE NUMBER (619) 421-6700 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 1/2014 Signature (File the originally signed statement with your filing official.) (month, day, year)