

RECEIVED
STATEMENT OF ECONOMIC INTERESTS
APR 08 2013
COVER PAGE
DPPC

CITY OF LA MESA
RECEIVED
2013 MAR 19 PM 5:42
Date Received
Official Use Only

Please type or print in ink.

NAME OF FILER (LAST) Erwin (FIRST) Ernest (MIDDLE) MARY J RENNE
CITY CLERK W

1. Office, Agency, or Court

Agency Name City of La Mesa
Division, Board, Department, District, if applicable City Council Your Position Member

► 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 La Mesa
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of _____
- Other _____

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

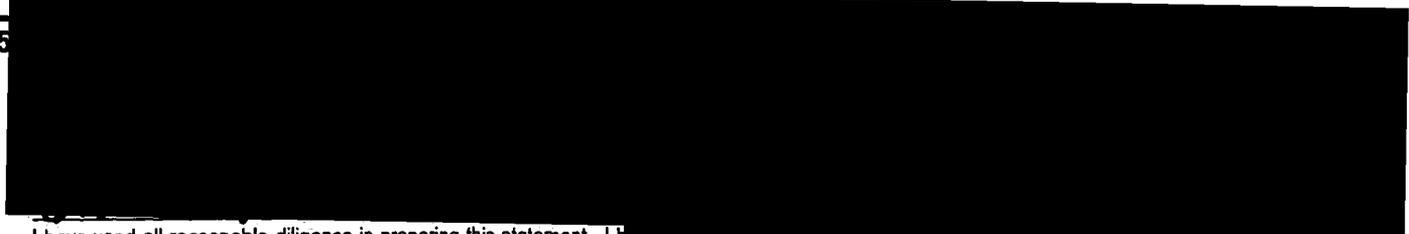
- Annual: The period covered is January 1, 2012, through December 31, 2012.
- or-
- The period covered is _____ through December 31, 2012.
- Assuming Office: Date assumed _____
- Leaving Office: Date Left _____ (Check one)
- The period covered is January 1, 2012, through the date of leaving office.
- The period covered is _____ through the date of leaving office.
- Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

- 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



I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the information herein and in any attached schedules is true and complete. I acknowledge that I am subject to the provisions of the Political Reform Act of 1974, including the provisions regarding the filing of this statement.

Date Signed 3/19/2013
(month, day, year)

Ernest Ewin
City Councilmember
City of La Mesa

Form 700 – Expanded Statement for 2012:

Agency

Position

La Mesa Community Redevelopment Agency

Agency Member

La Mesa Public Financing Authority

Authority Member

La Mesa Successor Agency

Agency Member

Metropolitan Transit System

Primary Representative

Metro Wastewater JPA/Commission

Primary Representative

Heartland Fire Training Facility Authority

Alternate Representative

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
Ernest Ewin

1. BUSINESS ENTITY OR TRUST

Name Ernest Ewin Consulting
 Address (Business Address Acceptable)
4420 Date Ave LAMERCA CA

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consulting

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION Owner/self

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY
None

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

Comments: _____

1. BUSINESS ENTITY OR TRUST

Name Law Office of Nancy Kaupp Ewin
 Address (Business Address Acceptable)
8106 LAMERCA BLVD LAMERCA 9194

Check one
 Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Legal Services

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$0 - \$1,999 / / 12 / / 12
 \$2,000 - \$10,000 ACQUIRED DISPOSED
 \$10,001 - \$100,000
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INVESTMENT
 Partnership Sole Proprietorship Other

YOUR BUSINESS POSITION Spouse

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499 \$10,001 - \$100,000
 \$500 - \$1,000 OVER \$100,000
 \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
 INVESTMENT REAL PROPERTY
None NA

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
 \$2,000 - \$10,000 / / 12 / / 12
 \$10,001 - \$100,000 ACQUIRED DISPOSED
 \$100,001 - \$1,000,000
 Over \$1,000,000

NATURE OF INTEREST
 Property Ownership/Deed of Trust Stock Partnership

Leasehold _____ Yrs. remaining Other _____

Check box if additional schedules reporting investments or real property are attached

SCHEDULE C
Income, Loans, & Business
Positions
 (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name
ERNEST EWING

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
Grossmont Cuyamaca Community College District Auxiliary

ADDRESS (Business Address Acceptable)
8800 Grossmont College Drive El Cajon 92022

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Foundation for Grossmont & Cuyamaca Colleges

YOUR BUSINESS POSITION
Executive Director of Development

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
LAW OFFICE OF NANCY KAUPP EWING

ADDRESS (Business Address Acceptable)
8166 LAMESA Blvd LAMESA CA 91942

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Legal Services

YOUR BUSINESS POSITION
Spouse

GROSS INCOME RECEIVED
 \$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
 Salary Spouse's or registered domestic partner's income
 Loan repayment Partnership
 Sale of _____
(Real property, car, boat, etc.)
 Commission or Rental Income, list each source of \$10,000 or more

 Other Professional Services - Legal
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____

ADDRESS (Business Address Acceptable) _____

BUSINESS ACTIVITY, IF ANY, OF LENDER _____

HIGHEST BALANCE DURING REPORTING PERIOD
 \$500 - \$1,000
 \$1,001 - \$10,000
 \$10,001 - \$100,000
 OVER \$100,000

NONE

INTEREST RATE _____% None

TERM (Months/Years) _____

SECURITY FOR LOAN
 None Personal residence
 Real Property _____
Street address

City
 Guarantor _____
 Other _____
(Describe)

Comments: _____

**SCHEDULE D
Income - Gifts**

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Ernest Ewin

▶ NAME OF SOURCE (Not an Acronym)
East County Chamber of Commerce

ADDRESS (Business Address Acceptable)
201 South Magnolia (210) 949-9400

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Business Promotions

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2012</u>	<u>\$ 45 -</u>	<u>3 Complimentary</u>
<u> </u>	<u>\$</u>	<u>First Friday</u>
<u> </u>	<u>\$</u>	<u>Breakfasts</u>

▶ NAME OF SOURCE (Not an Acronym)
Barona Band of Mission Indians

ADDRESS (Business Address Acceptable)
1098 Barona Road Lakeside 9400

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Tribes Nation

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>10/3/12</u>	<u>\$ 7.65</u>	<u>Meal</u>
<u>11/28/12</u>	<u>\$ 16.11</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>
<u> </u>	<u>\$</u>	<u></u>

Comments: _____