FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Add		<u>B</u> (. Date of Event Requiring Staten Month/Day/Year 19/03/2013	nent	3. Issuer Name and Ticker or Trading Symbol SAN DIEGO GAS & ELECTRIC CO [SDO]						
(Last) 101 ASH ST.	(First)	(Middle)				ationship of Reporting Perso c all applicable) Director	on(s) to Issuer 10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) SAN DIEGO (City)	CA (State)	92101 (Zip)	-			Officer (give title below)	Other (spe below)	cify	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		y One Reporting Person y More than One
		7	able I - Non	-Derivat	ive S	ecurities Beneficially	y Owned				
1. Title of Security (Instr. 4)						ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock											
Common Stock	ζ					0	D				
Common Stock	ζ	(e.ç				0 urities Beneficially 0 options, convertible	Owned	s)			
1. Title of Deriva				s, warra isable and ate	nts, c	urities Beneficially (Owned securities	4. Conver or Exer Price o	sion cise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)

Explanation of Responses:

Remarks:

Martha B. Wyrsch BY: James M. Spira, Attorney-In-Fact

09/04/2013

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.