

## PUBLIC INTEGRITY DISCLOSURE REPORT

<b>Name (Print last, first, middle initial)</b> Shay, Diana, R.		<b>E-mail Address</b> diana.shay@palmspringsca.gov
<b>Position/Title</b> Redevelopment Coordinator		
<b>Address</b> <div style="background-color: black; height: 20px; width: 100%;"></div>		
<b>Work Phone</b> 760-323-8260	<b>Reporting Status</b> New Official <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Update <input type="checkbox"/>	<b>If New Official, Date of Election or Appointment:</b> (mm/dd/yy)

**Reportable Information** – Every official shall disclose each and all of his/her interests, wherein he/she serves as a voting member of a board of directors of a non-profit entity without compensation, as an attorney or accountant for such an entity who provides *pro bono* services, or as the trustee of a charitable trust.

Organization: (include the address, city and state where the organization is located)	Type of organization:	Position:	No longer held:
1		<input type="checkbox"/> Voting Board Member <input type="checkbox"/> Attorney <input type="checkbox"/> Accountant	<input type="checkbox"/>
2		<input type="checkbox"/> Voting Board Member <input type="checkbox"/> Attorney <input type="checkbox"/> Accountant	<input type="checkbox"/>
3		<input type="checkbox"/> Voting Board Member <input type="checkbox"/> Attorney <input type="checkbox"/> Accountant	<input type="checkbox"/>
4		<input type="checkbox"/> Voting Board Member <input type="checkbox"/> Attorney <input type="checkbox"/> Accountant	<input type="checkbox"/>
5		<input type="checkbox"/> Voting Board Member <input type="checkbox"/> Attorney <input type="checkbox"/> Accountant	<input type="checkbox"/>
6		<input type="checkbox"/> Voting Board Member <input type="checkbox"/> Attorney <input type="checkbox"/> Accountant	<input type="checkbox"/>

Check here if additional pages attached.

RECEIVED  
 CITY OF PALM SPRINGS  
 2020 MAR 11 AM 10:24  
 OFFICE OF THE CITY CLERK

**Reportable Information** – Every official shall disclose each and all of his/her rented or leased interests in real property located in the City of Palm Springs. This disclosure shall include leases executed with the Agua Caliente Band of Cahuilla Indians in relation to real property that you own. You are not required to disclose a leased or rented residence used exclusively as a personal residence.

Property Address:	Type of Property:	Term of Rental Agreement/ Lease:	No longer held:
1	<input type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other		<input type="checkbox"/>
2	<input type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other		<input type="checkbox"/>
3	<input type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other		<input type="checkbox"/>
4	<input type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other		<input type="checkbox"/>
5	<input type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other		<input type="checkbox"/>
6	<input type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other		<input type="checkbox"/>

Check here if additional pages attached.

**I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.**

Signature of Disclosing Party 	Date 3-11-2020
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**On the basis of information contained in this report, I conclude that the filer is in compliance with Palm Springs Municipal Code Section 2.60, except as noted in the "comments" box below.**

**Comments:**

**Signature and Title of Agency's Final Reviewing Official**