

PUBLIC INTEGRITY DISCLOSURE REPORT

Name (<i>Print last, first, middle initial</i>)		E-mail Address	
Rotman, Robert, N		Robert.Rotman-ABM@palmsprings-ca.gov	
Position/Title			
Vice Chair, Architectural Advisory Committee			
Work Phone	Reporting Status	If New Official, Date of Election or Appointment: (mm/dd/yy)	
(310) 720-1384	New Official <input type="checkbox"/>	N/A	
	Annual <input checked="" type="checkbox"/>		
	Update <input type="checkbox"/>		

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: <i>(include the address, city and state where the organization is located)</i>	Type of organization:	Position:	No longer held:
1 Little Tuscany Neighborhood Organization 596 Via Escuela, Pam Springs, CA 92262	Neighborhood Organization - 501(c)(4)	<input checked="" 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"/>

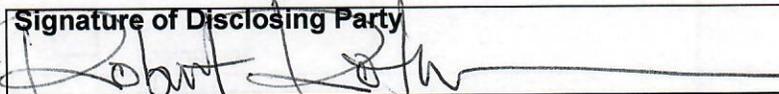
Check here if additional pages attached.

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 2490 N Janis Dr, Palm Springs, CA 92262	<input checked="" type="checkbox"/> Residential <input type="checkbox"/> Business/Commercial <input type="checkbox"/> Investment/Other	Homeshare	<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 3/27/2020
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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