

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

 Date Received
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NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Ferbert, Heather			

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of San Diego

Division, Board, Department, District, if applicable

Housing Commission

Your Position

Counsel

▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

- | | |
|--|---|
| <input type="checkbox"/> State | <input type="checkbox"/> Judge or Court Commissioner (Statewide Jurisdiction) |
| <input type="checkbox"/> Multi-County _____ | <input type="checkbox"/> County of _____ |
| <input checked="" type="checkbox"/> City of <u>San Diego</u> | <input type="checkbox"/> Other _____ |

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

- | | |
|---|--|
| <input type="checkbox"/> Annual: The period covered is January 1, 2013, through December 31, 2013 | <input checked="" type="checkbox"/> Leaving Office: Date Left <u>01 / 15 / 2014</u>
(Check one) |
| -or- | <input checked="" type="checkbox"/> The period covered is January 1, 2013, through the date of leaving office. |
| The period covered is ____/____/____, through December 31, 2013 | <input type="checkbox"/> The period covered is ____/____/____, through the date of leaving office. |
| <input type="checkbox"/> Assuming Office: Date assumed ____/____/____ | |
| <input type="checkbox"/> 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: 3

- | | |
|---|---|
| <input checked="" type="checkbox"/> Schedule A-1 - Investments – schedule attached | <input checked="" type="checkbox"/> Schedule C - Income, Loans, & Business Positions – schedule attached |
| <input type="checkbox"/> Schedule A-2 - Investments – schedule attached | <input type="checkbox"/> Schedule D - Income – Gifts – schedule attached |
| <input type="checkbox"/> Schedule B - Real Property – schedule attached | <input type="checkbox"/> Schedule E - Income – Gifts – Travel Payments – schedule attached |

-or- **None - No reportable interests on any schedule****5. Verification**

MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
<i>(Business or Agency Address Recommended - Public Document)</i>				
		San Diego	CA	92101
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)			
()				

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 02/11/2014
 (month, day, year)

 Signature Heather Ferbert
 (File the originally signed statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>Ferbert, Heather</u>
--

▶ NAME OF BUSINESS ENTITY
Comcast Corporation

GENERAL DESCRIPTION OF THIS BUSINESS
telecommunications

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
AT&T

GENERAL DESCRIPTION OF THIS BUSINESS
telecommunications

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
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IF APPLICABLE, LIST DATE:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

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IF APPLICABLE, LIST DATE:
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 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

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IF APPLICABLE, LIST DATE:
 _____ / _____ / _____ _____ / _____ / _____
 ACQUIRED DISPOSED

Comments: _____

