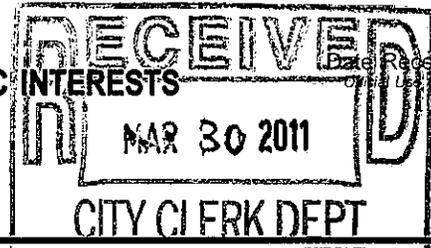


STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



Date Received
by User Only

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
11 APR - 11 PM 2:34

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Toles George Samuel

1. Office, Agency, or Court

Agency Name

City Of Cathedral City

Division, Board, Department, District, if applicable

Your Position

City Council

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Cathedral City Redevelopment Agency

Position: Board Member

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

State

Judge (Statewide Jurisdiction)

Multi-County _____

County of _____

City of Cathedral City

Other _____

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

Annual: The period covered is January 1, 2010, through December 31, 2010.

Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

The period covered is January 1, 2010, through the date of leaving office.

Assuming Office: Date 12 / 1 / 10

The period covered is ____/____/____, through the date of leaving office.

Candidate: Election Year _____

Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: _____

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification



Date Signed 3.26.11
(month, day, year)

Signature

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

Name of Business Entity: Gaiaam. General Description: Retail Distribution. Fair Market Value: \$2,000 - \$10,000. Nature of Investment: Other (Stock Options). Acquired: 12/1/10.

Name of Business Entity: Morgan Stanley Smith Barney. General Description: Brokerage. Fair Market Value: \$10,001 - \$100,000. Nature of Investment: Stock. Acquired: / / 10.

Name of Business Entity: Defined Benefits Solutions. General Description: 401K Management. Fair Market Value: \$10,001 - \$100,000. Nature of Investment: Other (401K Retirement Acct). Acquired: / / 10.

Name of Business Entity: (Blank). General Description: (Blank). Fair Market Value: (Blank). Nature of Investment: (Blank). Acquired: / / 10.

Name of Business Entity: (Blank). General Description: (Blank). Fair Market Value: (Blank). Nature of Investment: (Blank). Acquired: / / 10.

Name of Business Entity: (Blank). General Description: (Blank). Fair Market Value: (Blank). Nature of Investment: (Blank). Acquired: / / 10.

Comments:

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

CALIFORNIA FORM 700
 FAIR POLITICAL PRACTICES COMMISSION

Name _____

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME Gaiam, Inc	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable) 350 Madison Avenue 17th Floor New York, NY	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Retail Distribution	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION Vice President, Business Development	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <small>(Property, car, boat, etc.)</small> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more <input type="checkbox"/> Other _____ <small>(Describe)</small>

▶ 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*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		

BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN	
_____	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
HIGHEST BALANCE DURING REPORTING PERIOD	<input type="checkbox"/> Real Property _____	<small>Street address</small>
<input type="checkbox"/> \$500 - \$1,000		_____
<input type="checkbox"/> \$1,001 - \$10,000		<small>City</small>
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> Guarantor _____	
<input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Other _____	<small>(Describe)</small>

Comments: _____

**SCHEDULE D
 Income – Gifts**

▶ NAME OF SOURCE
Sang Chae
 ADDRESS (Business Address Acceptable)
Quality Inn Suites HWY 111 Cathedral City, 92234
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Hotel Owner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 3 / 10	\$ 40	Lunch
2 / 2 / 11	\$ 30	Drinks
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
Tom & Bonnie Barkley
 ADDRESS (Business Address Acceptable)
35-943 Date Palm Drive
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Restaurant Owners

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 9 / 11	\$ 30	Drinks
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
Richard Altman
 ADDRESS (Business Address Acceptable)
68-369 SunAir Drive Cathedral City, CA 92234
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Hotel Owner

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 2 / 10	\$ 150	Hotel Room
11 / 2 / 10	\$ 20	Champagne
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
Mark Winn
 ADDRESS (Business Address Acceptable)
67580 Dunes Road Cathedral City, CA 92234
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Real Estate Investor

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 15 / 10	\$ 100	Dinner & Drinks
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Comments: _____