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TP

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Wilson, Michael H.

1. Office, Agency, or Court

Agency Name: City of Indio City Councilmember  
Division, Board, Department, District, if applicable Your Position

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

Agency: Redevelopment Agency, Indio Water Authority Position: Commissioner

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

State  Judge (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of \_\_\_\_\_  
 City of INDIO  Other \_\_\_\_\_

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

Annual: The period covered is January 1, 2010, through December 31, 2010. -or-  
The period covered is \_\_\_\_\_ through December 31, 2010.  
 Assuming Office: Date 12, 01, 10  
 Leaving Office: Date Left \_\_\_\_\_ (Check one)  
 The period covered is January 1, 2010, through the date of leaving office.  
 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: 1  
 Schedule A-1 - Investments - schedule attached  
 Schedule A-2 - Investments - schedule attached  
 Schedule B - Real Property - schedule attached  
 Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule D - Income - Gifts - schedule attached  
 Schedule E - Income - Gifts - Travel Payments - schedule attached  
-or-  
 None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California  
Date Signed 1/18/2011 (month, day, year) Signature