

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Swanson Marsha

1. Office, Agency, or Court

Agency Name
 City of Wildomar
 Division, Board, Department, District, if applicable Your Position
 City Council Mayor

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 WILDOMAR CITY CLERKS OFFICE

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

Agency: _____ Position: _____

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

State Judge (Statewide Jurisdiction)
 Multi-County _____ County of _____
 City of _____ 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 ____/____/____
 Candidate: Election Year _____ Office sought, if different than Part 1: _____
 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.

4. Schedule Summary

Check applicable schedules or "None."
 ► Total number of pages including this cover page: 3
 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



herein and in any attached schedules is true and complete. I acknowledge this is
 I certify under penalty of perjury under the laws of the State of California that

Date Signed 03-22-11 Signature _____
 (month, day, year)

SCHEDULE D
Income – Gifts

Name
 Marsha Swanson

▶ NAME OF SOURCE
 Burke, Williams, & Sorensen, LLP
 ADDRESS (Business Address Acceptable)
 2280 Market Street, Ste 300, Riverside, CA 92591
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Law Office

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 16 / 10	\$ 70.00	Dinner at League Conf
12 / 13 / 10	\$ 40.00	Chocolate Pizza
___ / ___ / ___	\$ _____	_____

▶ 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

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ 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

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

▶ NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

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

Comments: _____