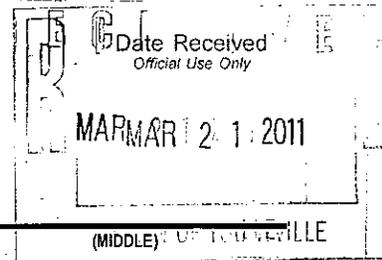


STATEMENT OF ECONOMIC INTERESTS

FAIR POLITICAL PRACTICES
COVER PAGE

11 APR -5 PM 1:55



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
CHILTON LEWIS GUTHRIE

1. Office, Agency, or Court

Agency Name
TOWN OF YOUNTVILLE
Division, Board, Department, District, if applicable
TOWN COUNCIL
Your Position
COUNCILMEMBER

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

Agency: SEE ATTACHED LIST Position: SEE ATTACHED LIST

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

- State Judge (Statewide Jurisdiction)
- Multi-County _____ County of Napa
- City of Yountville 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.
- 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.
- Assuming Office: Date ____/____/____
- 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: 5

- 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 a
I certify under penalty of perjury under the laws of the State of California that

Date Signed March 20, 2011
(month, day, year)

Signature

Lewis Guthrie Chilton
Town of Yountville - Councilmember
Form 700 Annual Filing
Section 1 – Office, Agency, or Court

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

Agency

Napa County Transportation & Planning Agency (NCTPA)
Napa County Flood Control & Water Conservation District
Local Agency Formation Commission of Napa County (LAFCO)
Napa County City Selection Committee (NCCSC)

Position

Board Member
Alternate Member
Alternate Member
Alternate Member

**SCHEDULE A-1
Investments**

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
LEWIS CHILTON

▶ NAME OF BUSINESS ENTITY
GENERAL ELECTRIC CO.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
CONGLOMERATE

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:
 _____ / _____ / **10** _____ / _____ / **10**
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
AMERICAN EXPRESS CO.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
CREDIT CARD COMPANY

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:
 _____ / _____ / **10** _____ / _____ / **10**
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
MICROSOFT CORP.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
COMPUTER SOFTWARE

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:
 _____ / _____ / **10** _____ / _____ / **10**
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / **10** _____ / _____ / **10**
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / **10** _____ / _____ / **10**
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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:
 _____ / _____ / **10** _____ / _____ / **10**
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE D
Income – Gifts

Name
 LEWIS CHILTON

▶ NAME OF SOURCE
ALVAREZ-GLASMAN & COLVIN

ADDRESS (Business Address Acceptable)
6795 WASHINGTON ST #D-R, YOUNTVILLE

BUSINESS ACTIVITY, IF ANY, OF SOURCE
LAW FIRM

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 5 / 10	\$ 40	FOOD & BEVERAGE
2 / 16 / 10	\$ 40	FOOD & BEVERAGE
4 / 6 / 10	\$ 40	FOOD & BEVERAGE

▶ NAME OF SOURCE
ALVAREZ-GLASMAN & COLVIN (CONTINUED)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6 / 15 / 10	\$ 40	FOOD & BEVERAGE
9 / 7 / 10	\$ 40	FOOD & BEVERAGE
10 / 5 / 10	\$ 40	FOOD & BEVERAGE

▶ 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: _____