

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE



CITY OF  
ST. HELENA  
MAR 8 1 2014

OFFICE OF  
CITY CLERK  
ROAM

Please type or print in Ink.

NAME OF FILER (LAST) SCULATTI (FIRST) MARIO (MIDDLE) ROAM

1. Office, Agency, or Court

Agency Name (Do not use acronyms) ST. HELENA CITY COUNCIL  
Division, Board, Department, District, if applicable CITY OF ST. HELENA  
Your Position

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

Agency: City Council Position: Council Member

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

- State
- Multi-County
- City of ST. HELENA
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of
- Other

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

- Annual: The period covered is January 1, 2013, through December 31, 2013.
- Leaving Office: Date Left
- The period covered is January 1, 2013, through the date leaving office.
- The period covered is through the date of leaving office.
- Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

- Check applicable schedules or "None."
- 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
- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

Date Signed MARCH 31st, 2014  
(month, day, year)

RECEIVED  
FAIR POLITICAL PRACTICES COMMISSION  
2014 APR - 3 PM 1:06

MRS

MRS

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
 (Ownership Interest is 10% or Greater)

Name  
MARIO SCULATTI

► 1. BUSINESS ENTITY OR TRUST

MARIO R SCULATTI WINE  
 Name

1335 MAIN # 106, ST. HELENA  
 Address (Business Address Acceptable)  
CA

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

\$0 - \$1,999                                      / / 13                      / / 13  
 \$2,000 - \$10,000                                      ACQUIRED                      DISPOSED  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INVESTMENT  
 Partnership     Sole Proprietorship     Other

YOUR BUSINESS POSITION FOUNDER

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                       OVER \$100,000  
 \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

WINE SALES  
CONSULTING

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:  
 INVESTMENT                       REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

\$2,000 - \$10,000                                      / / 13                      / / 13  
 \$10,001 - \$100,000                                      ACQUIRED                      DISPOSED  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

NATURE OF INTEREST  
 Property Ownership/Deed of Trust                       Stock                       Partnership

Leasehold 1 Yrs. remaining                       Other

Check box if additional schedules reporting investments or real property are attached

► 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE                      IF APPLICABLE, LIST DATE:

\$0 - \$1,999                                      / / 13                      / / 13  
 \$2,000 - \$10,000                                      ACQUIRED                      DISPOSED  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

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YOUR BUSINESS POSITION

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 \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

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NATURE OF INTEREST  
 Property Ownership/Deed of Trust                       Stock                       Partnership

Leasehold                      Yrs. remaining                       Other

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Comments: \_\_\_\_\_

