Lobbyist Employers: A person, other than a lobbying firm, who employs a lobbyist or contracts with a lobbying firm for economic consideration for the purpose of influencing legislative or administrative action is a "Lobbyist Employer." The Form 635 must be filed by lobbyist employers for each calendar quarter, regardless of whether the employer has made or incurred any payments during the quarter. In addition, a lobbyist employer must attach to file the Form 635 at the same time as the following:
1) A Form 615 (Lobbyist Report) completed by each in-house employee who is a lobbyist; and
2) An Attachment A Form 640 (Other Payments to Influence Legislative or Administrative Action Report).

Lobbying Coalitions: A group of 10 or more individuals or entities which pool their funds for the purpose of sharing the expenses of employing a lobbyist or contracting for the services of a lobbying firm is a "Lobbying Coalition." The Form 635 must be filed by lobbying coalitions for each calendar quarter, regardless of whether the coalition has made or incurred any payments during the quarter. Lobbying coalitions must attach to file the Form 635 at the same time as the following: 1) A Form 635-C (Payments Received By Lobbying Coalitions) disclosing payments received from members of the coalition; 2) A Form 615 (Lobbyist Report) completed by each in-house employee who is a lobbyist; and 3) An Attachment A Form 640 (Other Payments to Influence Legislative or Administrative Action Report).

An individual or entity that only makes payments to a lobbying coalition is not required to file this form, but may be required to file a Form 645 (Report of Person Spending \$5,000 or More to Influence Legislative or Administrative Action).

#### Where to File

**Electronic Filing:** The Form 635 must be filed online or electronically with the Secretary of State: (www.sos.ca.gov). if the total amount of any category of reportable payments, expenses, gifts, or other items is \$2,500 or more in a calendar quarter. All subsequent quarterly reports must also be filed electronically. No paper copies are required.

Paper Filing: If the Form 635 is not required to be electronically, an original and one copy of the Form 635 must be filed with:

Secretary of State Political Reform Division 1500 11th Street, Room 495 Sacramento, CA 95814

#### When to File

Deadline	Period Covered		
April 30	January 1 – March 31		
July 31	April 1 – June 30		
October 31	July 1 – September 30		
January 31	October 1 – December 31		

If a report is sent by first class mail, it is considered received on the date of postmark. Filing deadlines which fall on a Saturday, Sunday or official state holiday are extended to the next regular business day.

**IMPORTANT:** Except as noted above, there are no provisions in the Political Reform Act for extension of the filing deadlines. A person who files after a deadline is liable for a fine of \$10 per day until the report is filed.

For additional information about the Form 635 and other lobbying reports and requirements, see the <u>Lobbying Disclosure</u> <u>Manual</u>.

				FORM 635
REPORT OF LOBBYIST EMPL     (Government Code Section 861		🗌 Amendment (Explain	n here.)	
or <b>REPORT OF LOBBYING COAL</b> (2 Cal. Code of Regs. Section 186				PAGE OF
IMPORTANT: Lobbying Coalitions mu a completed Form 635-C with <del>to</del> this				FOR OFFICIAL USE ONLY
REPORT COVERS PERIOD FROM		THROUGH		A
CUMULATIVE PERIOD BEGINNING				
	TYPE OR P	<mark>RINT IN INK</mark>		В
NAME OF FILER:			EMAIL ADDRE	SS:
BUSINESS ADDRESS: (Number and Street)	(City)	(State)	(Zip Code)	TELEPHONE NUMBER:
(See instructions on reverse.)	inuation sheet a	t the end of the form.		
	SUMMARY	OF PAYMENTS THIS F	PERIOD	
<ul><li>A. Total Payments to In-House Employee Lobbyists</li><li>B. Total Payments to Lobbying Firms (Part III, Secti</li></ul>				
C. Total Activity Expenses (Part III, Section C)			\$	
D. Total Other Payments to Influence (Part III, Section	on D)		\$	
GRAND TOTAL (A + B + C + D above).			\$	
E. Total Payments in Connection with PUC Activitie	es (Part III, Sect	ion E)	\$	
F. Campaign Contributions:	mpleted <mark>and atta</mark>	nched 🗌 No campaig	gn contributions m	nade this period
	VER	IFICATION		

I have used all reasonable diligence in preparing this Report. I have reviewed the this Report and, to the best of my knowledge, the information contained herein and in the attached schedules in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on (Date)	At (City and State)	By (Signature of Employer or Responsible Officer)
Name of Employer or Responsible Officer (	<del>ype or Print)</del>	Title

## **INSTRUCTIONS FOR COMPLETING PAGE 1**

Check the box to indicate whether you are filing a report as a "Lobbyist Employer" or a "Lobbying Coalition." NOTE: Lobbying Coalitions must also complete and **attach** file the Form 635-C.

**PERIOD COVERED BY REPORT:** The period covered is the calendar quarter. (See the cover sheet of this form for periods covered.)

**CUMULATIVE PERIOD BEGINNING:** The "cumulative period" begins with January 1 of the current legislative session; except for the first report a filer is required to file, in which case the cumulative period begins with the first day of the calendar quarter in which the filer qualified.

## PART I - LEGISLATIVE OR STATE AGENCY ADMINISTRATIVE ACTIONS ACTIVELY

**LOBBIED DURING THE PERIOD:** You must report the legislative bills and state agency administrative actions which you "actively" influenced or attempted to influence, or your lobbyist or any lobbying firm with which you contract "actively" influenced or attempted to influence on your behalf during the calendar quarter. "Actively" lobbied means that a partner, owner, officer, or employee, or a lobbying firm with which you have contracted, either has engaged in direct communication, or has been directed by you to engage in direct communication, with a qualifying official for the purpose of influencing legislative or administrative action during the reporting period. (See the Lobbying Disclosure Manual for the definition of "direct communication.") Do not list bills or administrative actions which have died prior to the reporting period, or those which are only being watched or monitored, or those which you have not attempted to influence during the reporting period. You may either list the legislative bill numbers and administrative regulation numbers or provide a brief description of each legislative or administrative action actively lobbied during the quarter. When listing state administrative actions, provide the name of the state agency or department.

**SUMMARY OF PAYMENTS:** Enter the total amounts paid this period from each section of the report. With respect to campaign contributions, check the box which applies to your activities during the calendar quarter.

**VERIFICATION:** The report must be verified and signed by the filer. In the case of an organization, a responsible officer of the organization, or an attorney or a certified public accountant must sign on behalf of the organization.

PAGE		OF
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PERIOD COVERED:

CALIFORNIA FORM

635

NAME OF FILER:			_ PERIOD COVERED:			
PART II - PARTNERS, OWNERS, AND <mark>Attached to</mark> this repo			Г REPORTS" (FORM 6	15) ARH	E <mark>FILED V</mark>	VITH
Name and Title		Name ar	nd Title			
If more space is needed, check box and         PART III - PAYMENTS MADE IN CON						
A. PAYMENTS TO IN-HOUSE EMPLO (See instructions on reverse. Also enter t (Column 1) on Line A of the Summary o	he Amount This I	Period	(1) Amount This Period		Cum	(2) uulative Total To Date
			\$		\$	
B. PAYMENTS TO LOBBYING FIRM.	<b>S</b> (Including Ind	ividual Contract Lobby	ists)			
Name and Address of Lobbying Firm/ Independent Contractor	(1) Fees & Retainers	(2) Reimbursements of Expenses	(3) Advances or Other Payments ( <del>attach</del> provide explanation)	1	(4) Fotal 9 Period	(5) Cumulative Total to Date
If more space is needed, check box and use continuation sheet at the end of the form.	Also ente	HIS PERIOD (Column 4) r the total of Column 4 on L section on page 1.	ine B of the Summary of	\$		

## **INSTRUCTIONS FOR COMPLETING PAGE 2**

### PART II - PARTNERS, OWNERS, OFFICERS, AND EMPLOYEES WHOSE "LOBBYIST REPORTS" (FORM 615) ARE ATTACHED TO FILED WITH THIS REPORT: You must attach file a

"Lobbyist Report" (Form 615) completed by each owner, partner, officer, or employee who qualifies as a "lobbyist," and you must list that individual's name in Part II of the Report. NOTE: This does not include lobbyists who are registered separately as lobbying firms or lobbyists who are employed by lobbying firms with which you contract.

## PART III - PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES

**SECTION A.** Payments to In-House Employee Lobbyists: You must enter the total of all payments made in connection with lobbying activities during the quarter to the lobbyists listed in Part II of the Report. You must also report the cumulative amount of payments to in-house lobbyists since January 1 of the biennial legislative session for which the report is being filed. "Payments" include salary, reimbursement of expenses, an advance for expenses or a salary advance or any other payments made in connection with lobbying activities. (Salary includes gross wages paid, plus any fringe benefits which are in lieu of wages such as the granting of stock options or purchase of annuities. Salary does not include routine fringe benefits such as the employer's contributions to a health plan, retirement plan, or payroll taxes.) Also enter the total of Section A in the "Summary of Payments" section A any payments to lobbying firms.

**SECTION B.** Payments to Lobbying Firms (Including Individual Contract Lobbyists): A "lobbying firm" is any business entity, including an individual contract lobbyist, which contracts for economic consideration for the purpose of influencing legislative or administrative action on behalf of another person. You must disclose all payments to a lobbying firm, including fees and retainers, reimbursement of expenses, advances, or other payments. You must also report the cumulative amount of payments to the lobbying firm since January 1 of the biennial legislative session for which the report is being filed. Also enter the total of Column 4 in the "Summary of Payments" section on Page 1, Line B.

**IMPORTANT:** You must list each lobbying firm which has been authorized to lobby on your behalf, even if you have not made any payments to the firm during the period covered by this report. If no payments have been made during the quarter, enter the name of the lobbying firm in the proper section, and enter zeros in the columns. If you have made any payments to the lobbying firm since January 1 of the biennial legislative session, you must enter the "cumulative total to date" in Column 5.

PAGE	 OF
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NAME OF FILER:

PERIOD COVERED:

Date	Name and Address of Payee	Name and Official Position of Reportable Persons and Amount Benefiting Each	Description of Consideration	Total Amount of Activity
		\$		\$
cont	ore space is needed, check box and attach inuation sheets use continuation sheet at end of the form.	TOTAL SECTION C ( Also enter the total of the Summary of Payme	Section C on Line C of	\$
1.		<i>ISLATIVE OR ADMINISTRATIVE ACTION</i> ONS (NOTE: You must attach file a completed	¢	
2.		file <del>attach</del> a completed Form 640 with <del>to</del> this	\$	\$
BEFO		INISTRATIVE TESTIMONY IN RATEMAKI. ITIES COMMISSION Also, enter the total of		\$

#### **INSTRUCTIONS FOR COMPLETING PAGE 3**

**SECTION C.** Activity Expenses: An "activity expense" is any expense which benefits, in whole or in part, an elected state officer, a legislative official, an agency official, a state candidate, or a member of the immediate family of such officials or candidates. Activity expenses include gifts, honoraria, consulting fees, salaries, and any other form of compensation, but do not include campaign contributions.

You must itemize all activity expenses incurred by you, and you must report them during the period in which they occurred, regardless of whether or not they were actually paid during the period, and the information outlined below. This does not include activity expenses which were paid or incurred by a lobbyist and which were merely reimbursed by you or charged to an account paid by you. However, if a lobbyist "arranges" any payment incurred by a lobbyist employer which benefits a reportable person, both the employer and the lobbyist must itemize the expense.

Date: Enter the date the expense was incurred or the event occurred.

*Name and Address of Payee:* List the name and address of the vendor or other person to whom payment was made or incurred. If charged on a credit card, you must list the name of the credit card company and also the name of the vendor which received the payment.

*Name and Official Position of Reportable Persons and Amount Benefiting Each:* List the name and official position if any, of each reportable person who benefited from the payment. Also list the portion of the total activity expense which is attributable to each reportable person. **Note:** You are not required to list in this section yourself or any other person who benefited who is not a reportable person. You must, however, maintain in your records the total number of persons who benefited.

*Description of Consideration:* Describe the goods or services received by the reportable person(s), e.g., lunch, drinks, flowers, etc.

*Total Amount of Activity:* Enter the total amount paid, arranged, or incurred for the activity, not just the amount which benefited reportable persons. Regardless of the number of beneficiaries listed for a single payment, enter the payment in the "Total Amount of Activity" column only once.

SECTION D. Other Payments to Influence Legislative or Administrative Action:

Report as a lump sum all other payments you made in connection with your attempts to influence legislative or administrative action. (See instructions on the Form 640.) **NOTE: Form 640 must also be completed in addition to this section.** Also enter the total of Section D in the "Summary of Payments" section on Page 1, Line D. **NOTE: If you make payments to a lobbying coalition, you must also attach file a completed Form 630 to at the same time as this report.** 

**SECTION E.** Payments in Connection with Administrative Testimony in Ratemaking Proceedings Before the California Public Utilities Commission: Filers who make payments in connection with administrative testimony in ratemaking proceedings before the PUC (other than payments to a lobbyist or a lobbying firm) must report the lump sum of these payments in Section E. Payments to be reported include compensation paid to all attorneys, other than a lobbyist or a lobbying firm, for time spent testifying in the proceedings and compensation paid to all witnesses, other than a lobbyist or a lobbying firm, for time spent testifying in the proceedings. Compensation includes gross wages paid plus any benefits which are in lieu of wages such as the granting of stock options or the purchase of annuities. It does not include routine fringe benefits such as the employer's contributions to a health plan, retirement plan, or payroll taxes. No other in-house expenses or overhead in connection with such proceedings, you must report the payments in Part III, Section A or B, whichever is applicable. Also enter the total of Section E in the "Summary of Payments" section on Page 1, Line E.

DAGE	- OF	CA	LIFORNIA 635
		PERIOD COVERED:	
PART IV - C. made to or on b	ER: AMPAIGN CONTRIBUTIONS MADE (Monetary and non-mone half of state candidates, elected state officers and any of their contr candidates or officers must be reported in A or B below.)	netary campaign contributions of	\$100 or more
in a ca	contributions made by you during the period covered by this report, of mpaign disclosure statement which is on file with the Secretary of Secretary number, if any, below.		
Name of M Has Filed A	ajor Donor or Recipient Committee Which Campaign Disclosure Statement:	Identification Number if Recipient Committee:	
B. Contr made	butions of \$100 or more which have not been reported on a campaig by an organization's sponsored committee, must be itemized below.	n disclosure statement, including	contributions
Date	Name of Recipient	I.D. Number Committee	Amount
			\$
If more sp	ace is needed, check box and <mark>attach continuation sheets</mark> use continuatior	sheet at the end of the form.	

# **CONTINUATION SHEET FOR PART I**

PAGE \_\_\_\_\_ OF \_

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# REPORT OF LOBBYIST EMPLOYER/LOBBYING COALITION (FORM 635)

NAME OF FILER:	PERIOD COVERED:
PART I- LEGISLATIVE OR STATE AGENC	CY ADMINISTRATIVE ACTIONS ACTIVELY LOBBIED DURING THE PERIOD

If more space is needed, check box and use additional continuation sheets.

# CONTINUATION SHEET FOR PARTS II & III, B

PAGE \_\_\_\_\_ OF \_\_\_\_

# REPORT OF LOBBYIST EMPLOYER/LOBBYING COALITION (FORM 635)

NAME OF FILER:				PERIOD COV	ERED:	
PART II - PARTNERS, OWNERS, AN	D EMPLOYEE	<b>S</b> (Continued)	)			
Name and Title			Name	and Title		
PART III - PAYMENTS MADE IN CO B. PAYMENTS TO LOBBYING F			ING AC	TIVITIES	>	
Name and Address of Lobbying Firm/Independent Contractor	(1) Fees & Retainers	(2) Reimburser of Expen		(3) Advances or Other Payments ( <del>attach</del> provide explanation)	(4) Total This Period	(5) Cumulative Total to Date
If more space is needed, check box and use additional continuation sheets.	Also enter	THIS PERIOD r the total of C of Payments	Column 4	on Line B of the	\$	

# CONTINUATION SHEET FOR PART III, C

PAGE \_\_\_\_ OF \_

# REPORT OF LOBBYIST EMPLOYER/LOBBYING COALITION (FORM 635)

NAME OI	FFILER:		PERIOD (	COVERED:	
C. ACT	IVITY EXPENSES (Continued)				
Date	Name and Address of Payee	Name and Official Post of Reportable Persons Amount Benefiting Ea	and	Description of Consideration	Total Amount of Activity
			\$		\$
☐ If n add	nore space is needed, check box and use itional continuation sheets.	Also enter t	the total of Sec	tivity Expenses) ction C on Line C of s section on page 1.	\$

	CONTINUATION SHEET FOR	PART IV	
	CONTINUMION SHEET FOR	PAGE	OF
	REPORT OF LOBBYIST EMPLOYER/LOP (FORM 635)	<b>BBYING COALITION</b>	
NAME OF FILER:		_ PERIOD COVERED:	
PART IV - CAN	MPAIGN CONTRIBUTIONS MADE (Continued)		
Date	Name of Recipient	I.D. Number if Committee	Amount
			\$
			~

If more space is needed, check box and use additional continuation sheets.	•