

Attachment Form 640

"Other Payments to Influence
Legislative or Administrative Action"

CALIFORNIA
FORM

640

This attachment form corresponds to Section D of Form 635 (Report of Lobbyist Employer and Lobbying Coalition) and Section B of Form 645 (Report of Person Spending \$5,000 or More to Influence Legislative or Administrative Action). Use this attachment form to report "Other Payments to Influence Legislative or Administrative Action." Lobbyist employers or "\$5,000 filers" must complete this attachment form. Read carefully as certain payments are required to be itemized.

This attachment form should not include payments to salaried lobbyists, lobbying firms, activity expenses, or payments made in connection with PUC lobbying activity.

Other Payments to Influence Legislative or Administrative Action

1. Report as a lump sum all payments made for office overhead and operating expenses associated with influencing legislative or administrative action. Examples: rent, utilities, office supplies, and subscriptions to legislative tracking services.
2. Report as a lump sum all payments made to lobbying coalitions. Also complete and attach file Form 630.
3. Report as a lump sum all payments of less than \$250 made by state and local government agencies, or all payments of less than \$2,500 made by all other lobbyist employers and \$5,000 filers, during the calendar quarter for goods or services used by a lobbyist or used to support or assist a lobbyist (but not made directly to the lobbyist). Also include payments for expenses that would not have been incurred but for the agency's lobbying activities. Do not include overhead expenses such as rent, utilities, office supplies and subscriptions to legislative tracking services.
4. **Itemize** payments of \$250 or more made by state and local government agencies, or payments of \$2,500 or more made by all other lobbyist employers and \$5,000 filers, during the calendar quarter for goods or services used by a lobbyist or used to support a lobbyist in connection with his or her activities (but not made directly to the lobbyist). Also include payments that would not have been incurred but for the employer's lobbying activities. Do not include overhead expenses.

Before the payee name include a code (including the brackets before and after) to describe the primary purpose of the payment: (1) [S] for salary of employees other than lobbyists who are engaged for 10% or more of their time in one month in activities related to lobbying; (2) [E] for expenses incurred by a lobbyist and paid directly by the filer, or expenses incurred by the filer for goods or services used by a lobbyist; (3) [L] for legislative related-services performed by a lobbying firm under Regulation 18614(b)(2); (4) [C] for consultants and government relations; (5) [P] for public affairs, including coalition building and grassroots campaigns; (6) [A] for advertising; (7) [R] for research including feasibility studies, analysis, polling and public opinion research; (8) [V] for lobbying events including event planning, rentals, equipment, and transportation for members or the public; and (9) [O] for all other payments not covered by one of the specific categories. (See Cal. Code Regs., tit. 2, section 18616.)

State and local government agencies also must itemize dues or similar payments of \$250 or more made to an organization that makes expenditures equal to 10% of its total expenditures or \$15,000 or more in a calendar quarter to influence legislative or administrative action. Report the entire amount of the dues payment. Report dues payments in the calendar quarter in which the payments were made.

5. Add lines 1-4 and list the grand total of "Other Payments to Influence Legislative or Administrative Action." Also enter this total on the appropriate line of the Summary of Payments section on Page 1 of Form 635 or Form 645.

Attachment Form 640

(Attachment to File at the same time as Form 635 or Form 645)

PAGE _____ OF _____

NAME OF FILER: _____

PERIOD COVERED: _____

For Use By: A lobbyist employer or a \$5,000 filer. Refer to the instructions on the cover page before completing this attachment form.

Summary of Other Payments to Influence Legislative or Administrative Action:

1. Total payments for overhead expenses related to lobbying activity. Report as a lump sum.	\$ _____
2. Total payments to Lobbying Coalitions. Report as a lump sum. (Form 630 must also be filled be attached)	\$ _____
3. Total payments of less than \$250 or \$2,500, as applicable, during the calendar quarter for lobbying activity (excluding overhead). Report as a lump sum.	\$ _____
4. Total payments of \$250 or more or \$2,500 or more, as applicable, during the calendar quarter for lobbying activity (excluding overhead). Itemize payments below.	\$ _____
5. Grand total of "Other Payments to Influence Legislative or Administrative Action." Also enter this total on the appropriate line of the Summary of Payments section on Page 1 of Form 635 or Form 645.	\$ _____

Government agencies must itemize payments of \$250 or more, and all other lobbyist employers and \$5,000 filers must itemize payments of \$2,500 or more, made during the quarter for lobbying activity. Provide the payment code, name and address of the payee, the amount paid during the quarter, and the cumulative amount paid to the payee since January 1 of the current calendar year.

State and local government agencies also must itemize dues or similar payments of \$250 or more made to an organization that makes expenditures equal to 10% of its total expenditures or \$15,000 or more in a calendar quarter to influence legislative or administrative action. Government agencies must use the payment code [O] for these items.

Payment Code, Name & Address of Payee	Amount This Quarter	Cumulative Amount Since January 1
	\$	\$
	\$	\$
	\$	\$
Subtotal of all payments itemized above	\$	

If more space is needed, check box and attach complete continuation sheets.

Attachment Form 640
(Continuation Sheet)

PAGE _____ OF _____

NAME OF FILER: _____

PERIOD COVERED: _____

Payment Code, Name & Address of Payee	Amount This Quarter	Cumulative Amount Since January 1 of the Current Calendar Year
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Subtotal of all payments itemized above	\$	