### **Form 645**

Report of Persons Spending \$5,000 or More to Influence Legislative or Administrative Action

**Persons Spending \$5,000:** Persons who do not employ a lobbyist or contract with a lobbying firm but who make payments to influence legislative or administrative action (including payments to a lobbying coalition) aggregating \$5,000 or more in a calendar quarter must file Form 645. A Form 645 must be filed for each calendar quarter in which the person spends \$5,000 and is not required to be filed for any quarter in which the person does not spend at least \$5,000. (If the only payments made during a calendar quarter were "activity expenses" - payments which directly or indirectly benefit an elected state officer, legislative official, agency official, state candidate or member of the immediate family of such officer or candidate - no report is required for that quarter.) **NOTE: A completed Attachment Form 640 must be filed with this report.** 

# Where to File

The Form 645 must be filed **electronically** with the Secretary of State. No paper copies are required.

# 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

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 645 and other lobbying reports and requirements, see the Lobbying Disclosure Manual.

# REPORT OF PERSON SPENDING \$5,000 OR MORE TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION

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(Government Code Section 86116)		PAGE — OF —		
	VERS PERIOD FROM VE PERIOD BEGINNING	THROUGH	FOR OFFICIAL USE ONLY	
00.11022.111			A	
	TYPE OR PRINT IN INK		В	
NAME OF FILER:				
BUSINESS ADDRESS: (Number and Street)	(City) (S	State) (Zip Code)	TELEPHONE NUMBER:	
			( )	
If more space is needed, check box an	SUMMARY OF PAYMEN			
	Section A) ce (Part II, Section B)		*	
	CC (Fat II, Section B)		*	
	vith PUC Activities (Part II, Section C)			
CAMPAIGN CONTRIBUTIONS:	Part III completed and attach	ed No campai	ign contributions made this period	
information contained herein and i	VERIFICA e in preparing this Report. I have rev n the attached schedules is true and under the laws of the State of Califor	iewed the Report and to the complete.		
Executed on (Date)	At (City and State)	By (Signat	ure of Filer or Responsible Officer)	
	. (- )			
Name of Filer or Responsible Officer (Type	e or Print)	Title		

#### INSTRUCTIONS FOR COMPLETING PAGE 1

**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 biennial 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. "Actively" lobbied means that you or your agent have engaged 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 that 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.

CALIFORNIA 645

NAME OF	E OF FILER: PERIOD COVERED:				
PART II -	PAYMENTS MADE THIS PERIOD				
A. ACTI	IVITY EXPENSES (See instructions on rev	verse.)			
Date	Name and Address of Payee			Description of Consideration	Total Amount of Activity
			\$		\$
If more space is needed, check box and attach continuation sheets.  TOTAL SECTION A (Activity Expenses). Also enter the total of Section A on Line A of the Summary of Payments section on page 1.					\$
	ER PAYMENTS TO INFLUENCE LEGIS  PAYMENTS TO LOBBYING COALITIC		YE ACTION	\$	
2.	OTHER PAYMENTS (NOTE: Attach For	m 640.)		\$TOTAL SECTION B (1 + 2). Also enter the total of Section B on Line B of the Summary of Payments section on page 1.	\$
C. PAYMENTS IN CONNECTION WITH ADMINISTRATIVE TESTIMONY IN RATEMAKING PROCEEDINGS BEFORE THE CALIFORNIA PUBLIC UTILITIES COMMISSION (See instructions on reverse.) Also enter the total of Section C on Line C of the Summary of Payments section on page 1.				\$	

### **INSTRUCTIONS FOR COMPLETING PAGE 2**

**SECTION A.** 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 provide the information outlined below.

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. Also enter the total of Section A in the "Summary of Payments" section on Page 1, Line A.

**SECTION B.** Other Payments to Influence Legislative or Administrative Action:

Report as a lump sum all payments to lobbying coalitions and all other payments you made in connection with your attempts to influence legislative or administrative action. **NOTE: Form 640 must also be completed in addition to this section.** Also enter the total of Section B in the "Summary of Payments" section on Page 1, Line B. **NOTE: If you make payments to a lobbying coalition, you must also attach a completed Form 630 to this report. If you make payments to a lobbyist or a lobbying firm, or payments in support of a lobbyist, you must complete Form 635 (Report of Lobbyist Employer), not Form 645.** 

SECTION C. 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 C. 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 are reportable. However, if you make payments to a lobbyist or a lobbying firm in connection with PUC ratemaking proceedings, you must complete Form 635 (Report of Lobbyist Employer), not Form 645. Also enter the total of Section C in the "Summary of Payments" section on Page 1, Line C. NOTE: If you make payments to a lobbying coalition, you must also attach a completed Form 630 to this report.

PAGE	 OF	

NAME OF FILI	ER:	PERIOD COVERED:	
to or on behalf of	AMPAIGN CONTRIBUTIONS MADE (Monetary and non-mof state candidates, elected state officers and any of their controlled fficers must be reported in A or B below.)		
campa	contributions made by you during the period covered by this reporting disclosure statement which is on file with the Secretary of Statication number, if any, below.		ned in a
Name of Ma Has Filed A	ajor Donor or Recipient Committee Which Campaign Disclosure Statement:	Identification Number if Recipient Committee:	
	ibutions of \$100 or more which have not been reported on a campa by an organization's sponsored committee, must be itemized below		utions
Date	Name of Recipient	I.D. Number if Committee	Amount
			\$
☐ If more s	space is needed, check box and attach continuation sheets.		