FORM 690 – AMENDMENT TO LOBBYING DISCLOSURE REPORT

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GENERAL INFORMATION:

1. A "Sendback" letter is sent only when a signature is missing.
2. The form is not official until it's signed. Do not code the form into AMS if the signature is missing.
3. In many instances, missing or incomplete information may be found using other sources (e.g. existing record in AMS, other submitted forms, etc.).
4. If missing or incomplete information cannot be determined, attempt to contact the filer by phone, email or letter. Any information provided by the filer should also be obtained in writing.
5. Any questions regarding processes should be directed to a PRD supervisor.

AMENDMENT TO LOBBYING DISCLOSURE REPORT

FOR USE BY FILERS AMENDING REPORTS FILED PURSUANT
TO GOVERNMENT CODE SECTIONS 86100-86117

FORM 690
1990

TYPE OR PRINT IN INK

FOR OFFICIAL USE ONLY

A

B

For information required to be provided to you pursuant to the Information Practices Act of 1977, see Information Manual on Lobbying Disclosure Provisions of the Political Reform Act.

1 a-d

NAME OF FILER:

NAME OF EMPLOYER OR FIRM: (If this amendment is being filed by a lobbyist)

BUSINESS ADDRESS OF FILER: (Number and Street) (City) (State) (Zip Code)

TELEPHONE NUMBER: ( )

2 a-d

(The information required must correspond to the information provided on the original report filed.)

1. The following information amends the lobbying disclosure report Form No._____ executed on _____ (Mo. - Day - Year)

   for the period _____ to _____

2. Amended information affects items on Part(s) _____ Section(s)_____.

3. Describe changes below.

VERIFICATION

I have used all reasonable diligence in preparing this Amendment. I have reviewed the Amendment and to the best of my knowledge the information contained herein 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.

3 a-e

Executed on (Date)	At (City and State)	By (Signature of Filer)

Name of Filer (Type or Print)	Title

Clear Form Print Form

DATA ELEMENTS

This section provides guidance for reviewing the Form 690, explaining the data fields the filer must or may complete, and the method used for obtaining missing or incomplete information. It also indicates the location of the corresponding AMS data entry field (if any).

***Methods of Contact (MOC):**
PC –Phone Call
EL – Exception Letter
OC – Other contact (email, fax) – Use email for "overseas/out of country" lobbyists.
SB – Sendback Letter
N/A – No or No Action

No.	Data Element	Required: Yes/No	Comments	Action if missing/ incomplete/ *MOC	AMS Data Entry
1a	Name of Filer	Yes			Filer: Name
1b	Name of Employer or Firm	Yes, if applicable			Filer: Name
1c	Business Address of Filer	Yes	P.O. Box is not allowed		Filer: Address
1d	Telephone Number	Yes			Filer: Telephone Number
2a	Q1 – "The following information amends the lobbying disclosure report Form No. ____ executed on ____(MDY) for the period ____ to ____."	Yes			No field available to enter this data.
2b	Q2 – "Amended information affects items on Part(s) _____ Section(s) ____"	Yes			No field available to enter this data.
2c	Describe changes below	Conditional	Enter changes if AMS has fields available to enter data.		No field available to enter this data.
3a	Verification: Executed on (Date)	Yes			No field available to enter this data.
3b	At (City and State)	Yes			No field available to enter this data.
3c	By (Signature of Filer)	Yes		SB if signature is missing, EL if other signature issue	No field available to enter this data.
3d	Name of Filer (Type or Print)	Yes			No field available to enter this data.
3e	Title	Yes			No field available to enter this data.

Filing Requirements

This section provides an explanation of other forms that may have a dependency on this form, or whether this form has any dependencies on other forms.

Attachment Description	Required/ Optional	Comments
None		

Written Notations

This section explains information handwritten or stamped onto the Form.

Entered By	Notation	Comments
Lobby/Intake	Date Stamp	
Forms Reviewer	ID Number; Write 'L' (for Logging), <dash> initials to indicate this form has been coded.	E.g. "L-MP"

Signature Requirements

This section provides guidance on the individual(s) who may act as an authorized signer of the Form 690.

Authorized Signer	Comments
Filer or Responsible Officer	