FORM 630 – ATTACHMENT FORM: PAYMENTS MADE TO LOBBYING COALITIONS

1. General Information
2. Form 630
3. Data Elements
4. Filing Requirements
5. Written Notations
6. Signature Requirements

GENERAL INFORMATION:

1. In many instances, missing or incomplete information may be found using other sources (e.g. existing record in AMS, other submitted forms, etc.).
2. 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.
3. Any questions regarding processes should be directed to a PRD supervisor.

Form 630 – Attachment Form: Payments Made to Lobbying Coalitions Review Points – Form and AMS

ATTACHMENT FORM 630

PAYMENTS MADE TO LOBBYING COALITIONS

(Attachment to Form 625 or 635)

FORM 630
1990

1

Period Covered _____ Through _____

Cumulative Period Beginning _____

2

Name of Lobbying Firm or Lobbyist Employer Making Payments:

3 a-c

Name and Business Address of Lobbying Coalition Receiving Payments	Amount Paid This Period	Cumulative Amount Paid Since January 1 of Biennial Legislative Session
	$	$

Clear Form Print Form

(8/95)

Form 630 – Attachment Form:
Payments Made to Lobbying Coalitions
Review Points – Form and AMS

DATA ELEMENTS

This section provides guidance for reviewing the Form 630, 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
1	Period Covered ___ to ___/ Cumulative Period Beginning	Yes			Filer: Logging Form
2	Name of Lobbying Firm or Lobbyist Employer Making Payments	Yes			Filer: Name
3a	Name and Business Address of Lobbying Coalition Receiving Payments	Yes			No field available to enter this data.
3b	Amount Paid this Period	Yes			No field available to enter this data.
3c	Cumulative Amount Paid sine January 1 of Bienniel Legislative Session	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
Form 630	Required	This form is used as an attachment ot the quarterly disclosure reports filed by the firm or employer.

Form 630 – Attachment Form:
Payments Made to Lobbying Coalitions
Review Points – Form and AMS

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 630.

Authorized Signer	Comments
None	No signature required for this form