Document ID: CAL format 1.05.02   Date: 05/10/2000

CAL Release: 1.05

CAL Document: 1.05.02

                    California File .CAL Layouts
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*  O V E R V I E W  *
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In accordance with the requirements of SB 49, the Secretary of State (SOS)
is required to define standardized record format or formats for transmission
by the filing community of data required to be filed electronically under SB
49. The SOS will accept test files from vendors to ensure compliance and
compatibility with these formats, and publish a list of the certified
vendors or other parties who have successfully filed test reports with us.

This document contains the design definition of the California Electronic
Filing Format for the electronic filing of California Campaign and Lobbyist
Documents. This format defines the order and contents of the electronic
filing data files that will be accepted and processed by the State of
California's Candidate and Lobbyist Automated Information Management System
(CLAIMS). This filing format has been developed to meet the specific
requirements of SB 49 to implement electronic filing of these documents and
to disclose this data to the public over the Internet. The specific layout
of the format is derived from the data requirements of the forms themselves
and experience gained implementing similar systems in other venues.

This filing format is being used as the basis for the design of the CLAIMS
system and will be used to receive filings from filing software that use the
".CAL" format. Like all software development integration efforts of this type,
it is anticipated that minor problems will be found with the format. Please
submit problem reports related to any potential problems to dhulse@ss.ca.gov

The filing format is in the public domain and is non-proprietary. There are
no intellectual property limitations associated with the filing format. The
format is administered by the SOS and all changes or corrections to the
format will be managed by the SOS.

Proposed filing formats are provided for the following forms:

CAMPAIGN
========
  400   Statement of Organization (Slate Mailer Organization)
  401   Slate Mailer Organization Campaign Statement
  402   Statement of Termination (Slate Mailer Organization)
  405   Amendment to Campaign Disclosure Statement
  410   Statement of Organization Recipient Committee
  425   Semi-Annual Statement of no Activity
  450   Recipient Committee Campaign Disclosure Statement - Short Form
  460   Recipient Committee Campaign Statement (including Form 460 A-1)
  461   Independent Expenditure Cmtte & Major Donor Cmtte Campaign Statement
  465   Supplemental Independent Expenditure Report
  470   Officeholder and Candidate Campaign Statement - Short Form
  495   Supplemental Pre-Election Campaign Statement
  496   Late Independent Expenditure Report
  497   Late Contribution Report
  498   Slate Mailer Late Payment Report
```

Although the Form 460 A-1 is a separate stand-alone form, this form is always used as an attachment to the Form 460. Consequently, for electronic filing purposes, this form (or schedule) will be attached to the Form 460 cover page.


LOBBYIST
========
```
  601   Lobbying Firm Registration Statement
  602   Lobbying Firm Activity Authorization
  603   Lobbyist Employer or Lobbying Coalition Registration Statement
  604   Lobbyist Certification Statement
  605   Amendment to Registration, Lobbying Firm, Lobbyist Employer,
         Lobbying Coalition
  606   Notice of Termination
  607   Notice of Withdrawal
  615   Lobbyist Report
  625   Report of Lobbying Firm
  630   Payments Made to Lobbying Coalitions (Attachment to Form 625 or 635)
  635   Report of Lobbyist Employer or Report of Lobbying Coalition
  635-C Payments Received by Lobbying Coalitions
  640   Governmental Agencies Reporting (Attachment to Form 635 or Form 645)
  645   Report of Person Spending $5,000 or More
  690   Amendment to Lobbying Disclosure Report
```


The first record in a CAL file must be a short CSV (comma-separated-value) record identified with the text "HDR" in the first field and "CAL" in the second field.  The rest of the fields contain information such as version numbers and software identification for the filing database program which created the electronic CAL filing.  The layout of a HDR record is described on the next page.

The filing database program is responsible for creating the various record types described in this document.  It will assemble them into a single (.CAL) file with a HDR record, immediately followed by a CVR (Cover) record, followed by a number of other record types (e.g. CVR2, CVR3, SMRY, RCPT, EXPN,...) as required by a particular type of filing.  The specific record types that are should be included after the HDR and CVR records of each type of filing (e.g. F460 F615, F625, F635, ...) are listed at the beginning of each of the four Filing Sections later in this document.

Note:  The following layouts use 'Rx', 'R', 'Cx' & 'C' to indicate
if a field is (R)equired or (C)onditionally required.  If required
{or conditionally required} and data is missing, the 'x' indicates
whether this results in a filing being "Rejected" by the agency.

'Rx' = (R)equired field; SOS "Rejects" filing          (Level-8)
'R'  = (R)equired field, but SOS "Accepts" filing      (Level-4)
'Cx' = (C)ond Required field; SOS "Rejects" filing     (Level-8)
'C'  = (C)ond Required field, but SOS "Accepts" filing (Level-4)

'O'  = (O)ptional field.  Code is used within this document so that
        programs which 'read' this document can use a simple and
        consistent approach for parsing the text.


Header Record Layout (common to all CAL filing types)
=====================================================


| # | R{x} C{x} | Field Name | Max Len | Description |
|-----|-----|-----|-----|-----|
| 01 | Rx | Rec_Type | 3 | Record Type.  Value: HDR |
| 02 | Rx | EF_Type | 3 | Electronic Filing Type (a.k.a. Form_Type)  Value: CAL |
| 03 | Rx | State_Cd | 2 | State Code.  Value: CA |
| 04 | Rx | CAL_Ver | 4 | CAL Version #.  Value: 1.05 |
| 05 | Rx | Soft_Name | 90 | Filer Software Name |
| 06 | Rx | Soft_Ver | 16 | Filer Software Version # |
| 07 | O | HDRcomment | 200 | Optional comment (only used for development/testing) |

```
    N O T E S   A B O U T   C E R T A I N   F I E L D   T Y P E S
    =============================================================
```

E.F (.CAL) files are not case sensitive. Rec_Type, Form_Type and all
"code" fields (e.g. Entity_Cd, Yes/No fields, Check-box fields), can have
values represented in any mix of UPPERCASE or lowercase letters." It is
important that software that generates "CAL" files prevent any fields from
containing "leading spaces" (e.g. " Text information" has a leading space
before the word Text). Fields with leading spaces are not allowed.

Each kind of record must be coded with the exact number of field delimiters
necessary to define the number of fields as specified by this document. The
number of fields required on CVR and CVR2 records depends on the Form_Type.
All other records have field counts which vary with the value of Rec_Type.

DATES

All date fields must be in CCYYMMDD format. Dates are always coded as
8-digit fields in Century, Year, Month, & Day order.

AMOUNTS

Monetary amounts are stored with an "explicit" decimal point, which when
coded, must be followed by 1 or 2 (but no more than 2) decimal positions.
Embedded commas are not allowed and cause a filing to be rejected. Negative
amounts can be represented with a leading hyphen (-) character.

Examples:

```
    123.45    - represents an amount of $123.45
    345       - represents an amount of $345.00
   -567.8     - represents a negative amount of $567.80
 $1,234.00    - invalid & will be rejected (commas & other symbols not allowed)
   1234.00-   - invalid & will be rejected (no trailing '-' signs allowed)
```


RATES & PERCENTS

Rates & Percents are expressed as "freeform" text. When a Loan or Investment
is expressed in terms of a "rate", the value should be represented with an
explicit decimal point (e.g. 0.056). If the same "rate" is expressed as a
percentage, the % symbol should be used. A rate of 0.056 would be expressed
as 5.6%. There are times when rates are variable and expressed as "prime +
1%" or perhaps "15% + applicable T-bill". Percents/Rates are carried in
"CAL" files in fields of up to 30-characters.

NAMES

Names are carried in 4 explicitly defined fields:

1) Last Name is a 200 character field which is used for a person's last name
   or is used for the complete name of a non-person entity such as a committee,
   business, ballot measurer name, etc.

2) First name is a 45 character field which is used to store a person's first
   name and any middle name(s) and/or initials. For a person, it's all the
   names excepting the Last Name or surname.

   A Moniker may be included in the First name field. It can be identified
   with surrounding single-quote (') characters. It must not be surrounded
   with double-quote (") characters, because embedded double-quotes (") are
   not allowed within text fields in the CAL format. When displayed or
   printed in CLAIMS, the single-quote characters are shown as double-quotes.

3) Title (or prefix) is used for titles used by a person such as Mr, Mrs, Ms,
   Hon, Rep, Sen, Dr, and so on. Up to 10 characters are allowed.

4) Suffix is used for a person's suffix such as Jr, Sr, II, III, Esquire, etc.
   As many as 10 characters are allowed.

ADDRESSES

Addresses must contain a postal "delivery line" (such as a street address or a
PO box), plus city, state code and a 5-digit (or optionally a Zip+4) ZIP Code.
In other words, a complete "mailing address" should be given as an "address".

"CAL" records allow for 2 lines of address (in addition to the fields for city,
state code and ZIP Code). When only one line of street address is given, it
should be a postal delivery line and should be coded in the Address1 field
(Address2 field should be blank). When two lines of address are given, the
postal delivery line should be coded in Address2 (Address1 will contain "non-
delivery" information such as a building name, "attention:", etc.).

Zip Codes & Zip +4

Zip Codes are defined as a maximum of 10 characters. Zip Codes can be
stored as 5-digit, 9-digit, or as 5-digit/hyphen/4-digit values.

PHONE NUMBERS

Phone numbers are coded "freeform" in a 20-character Phone field. Any special
instructions (e.g. select #3 from the menu) and/or extension numbers should be
included in Phone number fields.

SINGLE CHECK-BOXES

Check-box fields differ from Yes/NO Boxes. Check-boxes reflect either a
"positive" response (i.e. the filer has put a check-mark, an "X" or some
other kind of marking in the Box), or "no response". The lack of a mark
in a Check-box means only that a "positive" response HAS NOT been made.
It does not indicate a "negative" response - the filer might have ignored
the Check-box on the form.

In electronic filing, Check-box fields are coded with an "X" to indicate
that the item on the form was "checked". Nothing is coded when the item
was not "checked".

CHECK-BOXES GROUPS

Forms often have groups of Check-boxes where only one box can be checked.
These are called "mutually exclusive" Check-box groups. The convention
used in "CAL" files is to define a single field to represent a group
of mutually-exclusive Check-boxes on a paper form. Code values are defined
to represent each possible selection (e.g. [1|2|3|...] or [A|B|C|...]).

Note: The convention in MS Windows is to offer mutually exclusive choices
       with what are called "radio buttons".

Note: The convention in "CAL" is to define a separate field for each
       check-box which is not part of a mutually exclusive group.
       (see Single Check-boxes above).

ENTITY CODES USED ON FORMS & SCHEDULES

The following Entity Codes are used to indicate various kinds of persons
and committees on "Cover Page" (CVR) record types:

```
    CAO - Candidate/Office-holder      (F460, F465, F470, F496, F497)
    CTL - Controlled Committee         (F460, F465, F496, F497)
    RCP - Recipient Committee          (F425, F450, F460, F465, F496, F497)
    SMO - Slate Mailer Organization    (F401, F498)
    BMC - Ballot Measure Committee     (F450, F460, F465, F496, F497)
    MDI - Major Donor/Ind Expenditure  (F461, F465, F496, F497)
    LBY - Lobbyist (an individual)     (F606, F607, F615, F645)
    FRM - Lobbying Firm                (F601, F602, F603, F625, F645)
    LEM - Lobbying Employer            (F601, F602, F603, F635, F645)
    LCO - Lobbying Coalition           (F601, F602, F603, F635, F645)
    IND - Person (spending > $5000)    (F645)
```

The following "Entity Codes" are used to indicate various kinds of persons
on "Additional Name/Address" CVR2 record types:

```
    ATR - Assistant Treasurer (F410, F425, F450, F460)
    POF - Principal Officer  (F400, F410, F465)
    OFF - Officer (F465-Part5, F625, F635)
    CAO - Cand/Officeholder (F410, F460-Part4a, F460-Part5b, F460-Part6, F465)
    PRO - Proponent  (F410, F460-Part5b)
    SPO - Sponsor  (F410)
    BNM - Ballot Measure's Name/Title  (F410, F460-Part5a)
    ATH - Authorizing Individual  (F400)
    COM - Committee  (F400, F460-Part4b, F470-Part4)
    CTL - Controlled Committee  (F410, F460-Part4b, F470-Part4)
    RCP - Recipient Committee  (F400, F460-Part4b, F470-Part4)
    PTN - Partner (F625, F635)
    OWN - Owner (F625, F635)
    EMP - Employer (F625, F635, F603)
    FRM - Lobbying Firm (F603)
    AGY - State Agency (F603)
    SCL - Subcontracted Client (F602)
    MBR - Member of Associaton (F602)
```

    Note: F460 Part4a/Part4b & Part5a/Part5b refer to the "upper"/"lower"
          portions of Parts 4 and 5 located on the 460's second cover page.

The following CVR2 "Item Codes" indicate which Section within F400 & F410
reports the Entity is to be listed:

```
    ATR - (Item_Cd) Assistant Treasurer (F410)
    POF - (Item_Cd) Principal Officer (F400, F410)
    CTL - (Item_Cd) Controlled Committee (F410)
    PFC - (Item_Cd) Primarily Formed Committee Item (F410)
    SPO - (Item_Cd) Sponsored Committee Itemization (F410)
    SMA - (Item_Cd) Slate Mailer Authorizor (F400)
```

ENTITY CODES USED ON FORMS & SCHEDULES (continued)

The following Entity Codes are used to indicate various kinds of persons
on "verification" CVR3 record types:

    TRE - Treasurer
    CAO - Candidate/Office Holder
    OFF - Officer (Responsible)
    PRO - Proponent
    SPO - Sponsor

The following Entity Codes are used to indicate various kinds of persons and
organizations on various schedules including RCPT, EXPN, and LOAN record types:

    COM - Recipient Committee
    RCP - Recipient Committee
    IND - Individual
    OTH - Other

LOBBYING ACTIVITY DESCRIPTION (Lby_Actvty on Lobbyist CVR & LPAY records)

If additional space is needed to describe this activity, attach a text memo
record describing the activity to the filing. When reporting lobbying activity,
the preferred format to identify bills is the type of bill followed by the bill
number. Each bill is separated by a space character or comma. Putting a white
space between the bill type and bill number is optional. Formatting the
information in this manner provides the public with better access to bill
information. The following variations comply with this definition.

AB26 AB30, SB300, SB 285 AB 325,SB203, AB 25

The codes recognized by the system are AB, AC, ACA, ACR, AJR, HR, SB, SCA,
SCR, SJR, and SR. In addition, any of these codes followed by an X and a
single digit (for example ABx7 or ABx 7) will be recognized.

```
OFFICE CODES USED ON FORMS & SCHEDULES
--------------------------------------


      Statewide Offices
      -----------------
      GOV - Governor
      LTG - Lieutenant Governor
      SOS - Secretary of State
      CON - State Controller
      ATT - Attorney General
      TRE - State Treasurer
      INS - Insurance Commissioner
      SUP - Superintendent of Public Instruction


      State District Offices
      ----------------------
      SEN - State Senator
      ASM - State Assembly Person
      BOE - Board of Equalization Member


      City, County and Local Offices
      ------------------------------
      ASR - Assessor
      BED - Board of Education
      BSU - Board of Supervisors
      CAT - City Attorney
      CCB - Community College Board
      CCM - City Council Member
      COU - County Counsel
      CSU - County Supervisor
      CTR - Local Controller
      DAT - District Attorney
      MAY - Mayor
      PDR - Public Defender
      PLN - Planning Commissioner
      SHC - Sheriff-Coroner
      SCJ - Superior Court Judge
      TRS - Local Treasurer


      Miscellaneous / Other
      ---------------------
      OTH - Other
```

EXPENSE CODES USED ON 460 EXPENSE SCHEDULES

    These 3-chararacter codes have been described by the FPPC for use on
    F460 / Schedules E, F and G. CLAIMS uses these codes universally on
    other forms & schedules when Expense Amounts require categorization.

    CMP - campaign paraphernalia/miscellaneous
    CNS - campaign consultants
    CTB - contribution (if nonmonetary, explain)*
    CVC - civic donations
    FND - fundraising events
    IND - independent expenditure supporting/opposing others (explain)*
    LIT - campaign literature and mailings
    MTG - meetings and appearances
    OFC - office expenses
    PET - petition circulating
    PHO - phone banks
    POL - polling and survey research
    POS - postage, delivery and messenger services
    PRO - professional services (legal, accounting)
    PRT - print ads
    RAD - radio airtime and production costs
    RFD - returned contributions
    SAL - campaign workers salaries
    TEL - T.V. or cable airtime and production costs
    TRC - candidate travel, lodging and meals (explain)
    TRS - staff/spouse travel, lodging and meals (explain)
    TSF - transfer between committees of the same candidate/sponsor
    VOT - voter registration
    WEB - information technology costs (internet, e-mail)

  * Note: IND & CTB (if nonmonetary) require explanations, and must
          be listed on Schedule D. TRC & TRS require explanations.

    CLAIMS Expense Codes which are not explicitly listed on FPPC forms.

    MON - Monetary contribution - this code means that the contribution is
          specifically a monetary contribution. It is not an allowable value
          for Schedules E, F & G on F460 filings. It can be coded as a value
          on Schedule D, and on the F450P5, F461P5 and F465P3 schedules.

    IKD - Non-monetary contribution - this code means that the contribution is
          specifically a non-monetary contribution. It is not an allowable
          value for Schedules E, F & G on F460 filings. It can be coded as a
          value on Schedule D, and on the F450P5, F461P5 and F465P3 schedules.

    LON - Loan - This is a "generic" code meaning that a F461P5 contribution
          is a Loan. Other Codes used on F461P5 are 'MON', 'CTB' & 'IND'.

AMENDMENT PROCESSING OF ITEMS IN SCHEDULES

Tran_ID: A unique identifier permanently associated with each itemization or
transaction appearing in a CAL electronic file. If a given itemization appears
in more than one schedule (e.g. a forgiven loan is reported on both Schedule A
and Schedule B) then the Tran_ID associated with that itemization can either
have the same value or different values for that single item among the various
schedules. However, all Tran_IDs of itemizations appearing in any amending
report must match the Tran_IDs first used for those same itemizations in the
original report.

The Tran_ID assigned and maintained by the filer's software is used by the
California SOS's database to uniquely identify each itemization from every
schedule and from every filer. It is critically important that when a filer
amends a previously filed electronic report, the Tran_IDs of the subsequent
amendment match those already reported. It is acceptable for a Tran_ID of one
orignal report to be assigned a value that was used on a previous original
report. Tran_IDs must be unique WITHIN a report group - that is an original
report and all of it's amendments.

Although software will assign a Tran_ID to a dollar itemization on almost all
schedules, this is not so with the 460's Schedule F. "Schedule" F is a series
of summarizations - the main entries are summarizations for a payee/creditor.
Therefore Tran_IDs on Schedule F will be unique identifiers used for the
payee/creditor entity. Sub-itemizations on Schedule F that show new incurred
expenses for the reporting period will, however, be assigned Tran_IDs for the
individual incurred expense items.

A unique Tran_ID must also be assigned to each CVR2 and CVR3 record. Since
these are not "money" records, the Tran_ID will be a unique itentifier that
is assigned to the Entity who/which is coded in each CVR2 and CVR3 record.

MEMOS NOTES & EXPLANATORY TEXT

Large bodies of text can be associated with forms and also with individual
itemizations within schedules. A special TEXT record can be used in a CAL
file to carry descriptive text as a string of characters not exceeding 4000
characters.

TEXT records can be associated with a filing's "cover" page, with a schedule as
a whole, and to one or more individual itemizations within a schedule.

The contents of TEXT records are printed on "pages" following the form(s) to
which they are related. For example, a body of TEXT related to a cover form
will be shown following that form. Likewise, TEXT related to a schedule (as a
whole and/or itemizations within that schedule) are printed on pages after the
last detailed itemization of the particular schedule. Depending on the amount
of "white space" available on a form, the print rendering software in CLAIMS
will attempt to "fit" short text memos within the immediate proximity of the
item to which the memo is attached, othwise it is printed on separate "pages".

CAL layouts for Schedules include a field named Memo_RefNo. This is a value
assigned by the filer and is printed within the itemization area of the printed
schedule as a "reference" to the memo text that is printed after the last
detailed itemization in the schedule. Memo_RefNo can be thought of as being
like a footnote reference.

The layout of the TEXT record is described below:

```
  R{x}              Max
# C{x} Field Name   Len  Description
----- ----------   ---  -----------

01 Rx  Rec_Type      4  Record Type Value: TEXT

02 Rx  Form_Type     8  Contains 'Form_Type' of a "cover" Form (F4**, F6**)
                        or a Schedule (e.g. A,B1,C,E, ...) to which this
                        text/memo/note is related.
                        Values:  (F4**, F6**, any schedule name)

03 O   Ref_No       20  The value contained in a schedule itemization's
                        'Memo_RefNo' field.

04 R   Text4000   4000  A string of unformatted text up to 4000 characters.
                        (note:  no tab, carriage return, line feed or any
                         other non-printable characters may be embedded
                         within the string of text.)
```

Examples:

TEXT,F460,,"Some general notes about this 460 filing are given here."
TEXT,A,,"Some general notes about Schedule A in this 460 filing."
TEXT,C,123,"A long memo for an item in Schedule C that references Memo 123."

BACK-REFRENCING TO RELATE "CHILD" SUBITEMIZATIONS BACK TO "PARENT" ITEMIZATIONS

Schedules that can have child records have a new BakRef_TID field are:

Disclosure Report	Report/Schedule	Rec Type
401 Slate Mailer Camp Stmt:	401/B	S401
460 Campaign Statement:	460/A; 460/C	RCPT
460 Campaign Statement:	460/E; 460/G	EXPN
460 Campaign Statement:	460/B1; 460/B2	LOAN
460 Campaign Statement:	460/F	DEBT
Lobbyist Activity Expenses:	615/P1; 625/P3-A; 635/P3-C; 645/P2	LEXP
Lobbyist Payments Received:	625/P2	LPAY
Lobbyist Payments Made:	635/P3-B	LPAY
Lobbyist Pol Contribs Made:	615/P2; 625/P4-B; 635/P4-B; 645/P3-B	LCCM

The BakRef_TID of a "sub-itemization" (a "child" record in programmer talk)
is used to "refer back" to the main itemization record in a schedule. A
sub-itemization (like a "memo" record where Memo_Code=X) does not count
toward any schedule or summary page dollar totals. It is an informational
record.

A non-blank BakRef_TID both indicates that a record is a "child" record, and
also points (refers back) to the main itemization or "parent" record. The
value that is coded into the BakRef_TID of a child record is that of the
Tran_ID belonging to the parent record.

The CLAIMS system maintains references so that entities listed in "sub-
itemizations" can be located in querys of the CLAIMS database.

The 460 Schedule G is a special case where ALL entires on that form are really
sub-itemizations for items that appear on the 460's Schedule E or Schedule F.
Filers have the option of coding Schedule E/F sub-itemizations within Schedules
E/F themselves, or separately on Schedule G. CLAIMS will maintain referneces
from child records on Schedule G back to the parent records on Schedule E/F by
using Schedule G's BakRef_TIDs (which are required on Sched G). A field called
G_From_E_F on the EXPN layout is used for Schedule G "child" records to
indicate whether the "parent" record is found on Schedule E or Schedule F.

Programmers should note that "parent" records on the F460's Schedule F are
assigned Tran_IDs that are unique for the Payee/Creditor or are unique for the
"debt". However, "child" sub-itemizations of new incurred expenses and new
payments are assigned Tran_ID's unique to the incurred item. The values in
BakRef_TID's in Schedule F need to take this into account.

```
******************************************************************************
 S e c t i o n  1  -  C a m p a i g n  D i s c l o s u r e  R e p o r t s
******************************************************************************
```

        401 Slate Mailer Organization Campaign Statement
        405* Amendment to Campaign Disclosure Statement
        425 Semi-Annual Statement of no Activity
        450 Recipient Committee Campaign Disclosure Statement - Short Form
        460 Recipient Committee Campaign Statement
        461 Independent Expenditure Committee and Major Donor Committee
             Campaign Statement
        465 Supplemental Independent Expenditure Report
        470 Officeholder and Candidate Campaign Statement - Short Form
        495* Supplemental Pre-Election Campaign Statement
        496 Late Independent Expenditure Report
        497 Late Contribution Report
        498 Slate Mailer Late Payment Report

         * The 405 and 495 forms are not filed as stand-alone filings.
           Instead they are included within F450 and F461 filings.

```
******************************************************************************
```

```
         Electronic File Components by Filing Type
         =========================================


  RecType    FormName   Description
  -------    --------   -------------------------------------------------
   HDR       CAL        "CAL" Header record
   CVR       F401       Cover Page; Slate Mailer Organization
   CVR3      F401       Cover Page; Part IV; Verification Information
   SMRY      F401...    Summary Page & Misc. Schedule Line-item [sub]totals
   RCPT      F401A      Payments Received
   S401      F401B      Payments Made
   S401      F401B-1    Payments Made by Agent/Contractor on Behalf of SMO
   S401      F401C      "F400" Persons in SMO Receiving $1000 or more
   S401      F401D      Candidates/Measurers not on Schedule F401A


   HDR       CAL        "CAL" Header record
   CVR       F425       Cover Page; Semi Annual Statement of No Activity
   CVR2      F425       Cover Page; Part 1; Assistent Treasurer
   CVR3      F425       Cover Page; Part 3; Verification Information


   HDR       CAL        "CAL" Header record
   CVR       F450       Cover Page; Recipient Committee
   CVR2      F450       Cover Page; Part 3; Assistent Treasurer
   CVR3      F450       Cover Page; Verification Information
   F405      F450       Amendment Information sheet (a.k.a. Form 405)
   F495      F450       Supplemental Pre-Election Statement (a.k.a. Form 495)
   SMRY      F450...    Summary Page & Misc. Schedule Line-item [sub]totals
   EXPN      F450P5     Expenditures & Contributions Made


   HDR       CAL        "CAL" Header record
   CVR       F460       Cover Page; Candidate Committee
   CVR2      F460       Cover Page; Additional Committees, Asst Treas, etc.
   CVR3      F460       Cover Page; Part 7; Verification Information
   F405      F460       Amendment Information sheet (a.k.a. Form 405)
   F495      F460       Supplemental Pre-Election Statement (a.k.a. Form 495)
   SMRY      F460...    Summary Page & Misc. Schedule Line-item [sub]totals
   RCPT      A          Schedule A Contributions
   RCPT      A-1        Schedule A-1 Contribs Trans to Spec Election Cmtte
   RCPT      C          Schedule C Non-Monetary Contributions
   RCPT      I          Schedule I Miscellaneous
   EXPN      D          Schedule D Summary of Expenditures - Support/Oppose ...
   EXPN      E          Expenditures
   EXPN      G          Expenditures "on behalf" of another Committee
   DEBT      F          Accrued Expenses (Unpaid Bills)
   LOAN      B1         Loan Received
   LOAN      B2         Loan - Repayment Made
   LOAN      B3         Loan - Unpaid Balance
   LOAN      H1         Loan Made
   LOAN      H2         Loan - Repayment Received
   LOAN      H3         Loan - Unpaid Balance
```

```
 RecType    FormName   Description
 -------    --------   ------------------------------------------------
  HDR       CAL        "CAL" Header record
  CVR       F461       Cover Page; Ind Expenditure & Major Donor Committee
  CVR3      F461       Cover Page; Part 4; Verification Information
  F405      F461       Amendment Information sheet (a.k.a. Form 405)
  SMRY      F461...    Summary Page & Misc. Schedule Line-item [sub]totals
  EXPN      F461P5     Expenditures & Contributions Made


  HDR       CAL        "CAL" Header record
  CVR       F465       Cover Page; Supplemental Independent Expenditure Rpt
  CVR2      F465       Cover Page; Part V Filing Officer Titles & Addresses
  CVR3      F465       Cover Page; Part VII; Verification Information
  SMRY      F465...    Summary Page & Misc. Schedule Line-item [sub]totals
  EXPN      F465P3     Independent Expenditures Made


  HDR       CAL        "CAL" Header record
  CVR       F470       Cover Page; Officeholder/Cand Short Form & Supplement
  CVR2      F470       Cover Page; Part IV; Committee Names & Addresses
  CVR3      F470       Cover Page; Part V; Verification Information


  HDR       CAL        "CAL" Header record
  CVR       F496       Cover Page; Late Independent Expenditure Report
  S496      F496       Independent Expenditures Made


  HDR       CAL        "CAL" Header record
  CVR       F497       Cover Page; Late Contribution Report
  S497      F497P1     Late Contributions Received
  S497      F497P2     Late Contributions Made


  HDR       CAL        "CAL" Header record
  CVR       F498       Cover Page; Slate Mailer Late Payments Report
  S498      F498-R     Late Payments Received From:
  S498      F498-A     Late Payments Attributed To:
```

```
COVER PAGE RECORD LAYOUT FOR F401, F450, F460, F461 DISCLOSURE REPORTS
                          F425 STATEMENT OF NO ACTIVITY
                          F465 SUPPLEMENTAL INDEPENDEDNT EXPENDITURE
                          F496, F497, F498 LATE CONTRIB/EXPEND REPORTS
========================================================================

  R{x}              Max
# C{x} Field Name   Len  Description
----- ----------   ---  -----------
01 Rx  Rec_Type      3  Record Type Value: CVR
02 Rx  Form_Type     4  Type of Filing or Form set.
                        Values:  F401; F425; F450; F460; F461; F465;
                                   F496; F497; F498

03 Rx  Filer_ID      9  Committee ID number of Filer

04 O   Entity_Cd     3  Values:
                           CAO - Candidate/Office-holder (F460,465,496,497)
                           CTL - Controlled Committee (F460,465,496,497)
                           RCP - Recipient Committee (F460,425,450,465,496,497)
                           SMO - Slate Mailer Organization (F401,498)
                           BMC - Ballot Measure Committee (F460,450,465,496,497)
                           MDI - Major Donor/Ind Expenditure (F461,465,496,497)

05 Rx  Filer_NamL  200  Filer's Last name
06 C   Filer_NamF   45  Filer's First name(s) (Required for persons)
07 O   Filer_NamT   10  Filer's Prefix or Title
08 O   Filer_NamS   10  Filer's Suffix

09 Rx  Report_Num    3  Report Number - Values: 000     - Original Report
                                                001-999 - Amended Rpt #1-#999
10 Rx  Rpt_Date      8  Date this report is filed

11 Cx  Stmt_Type     2  Type of Statement - Values:
                        PE = Pre-Election              (F450,F460)
                        SE = Supplemental Pre-elect    (F450,F460)
                        SY = Special Odd-Yr. Campaign  (F450,F460)
                        SA = Semi-annual               (F450,F460)
                        TS = Termination Statement     (F450,F460)
                        QT = Quarterly Stmt            (F450,F460)
                        S1 = Semi-Annual (Jan1-Jun30)  (F425)
                        S2 = Semi-Annual (Jul1-Dec31)  (F425)
                        (Null value {not Req.} on F461, F401, F465, F496, F498)

12 Cx  Rpt_ID_Num   30  Identifying Report Number on a Late Ctrib/Payment Rpt
                        or an Ind Exp Report (Req. on F465, F496, F497 & F498).
                        (This user assigned value is printed in the Report No.
                        and Amended Report No. fields on 496 & 497 forms and
                        is printed on electronic versions of 465 & 498 forms.)

13 Cx  From_Date     8  Reporting Period From Date (not Req. on F496,497,498)
14 Cx  Thru_Date     8  Reporting Period Through Date (not Req. on F496,497,498)
15 C   Elect_Date    8  Date of the General Election
                        (Req. on F450,F460,F461,F465 in even years)
```

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)
===

```
  R{x}            Max
# C{x}  Field Name Len  Description
-----  ---------- ---  -----------
16 R    Filer_Adr1  55   Street 1 of Filing Entity
17 O    Filer_Adr2  55   Street 2 of Filing Entity
18 R    Filer_City  30   City of Filing Entity
19 R    Filer_ST     2   State of Filing Entity
20 R    Filer_ZIP4  10   ZIP+4 of Filing Entity
21 O    Filer_Phon  20   Phone Number of Filing Entity
22 O    Filer_FAX   20   FAX Phone Number {not mapped to present FPPC forms}
23 O    File_Email  60   Email Address    {not mapped to present FPPC forms}

24 O    Mail_Adr1   55   Street 1 Mailing Address of Filer (if different)
25 O    Mail_Adr2   55   Street 2 Mailing Address of Filer (if different)
26 C    Mail_City   30   City Mailing Address of Filer (if different)
27 C    Mail_ST      2   State Mailing Address of Filer (if different)
28 C    Mail_ZIP4   10   ZIP+4 Mailing Address of Filer (if different)

(Tres. fields #29 - 40 not used on F496 & F497 filings)
29 C    Tres_NamL  200   Treasurer or Responsible Officer's Last name
30 C    Tres_NamF   45   Treasurer or Responsible Officer's First name
31 O    Tres_NamT   10   Treasurer or Responsible Officer's Prefix or Title
32 O    Tres_NamS   10   Treasurer or Responsible Officer's Suffix
33 C    Tres_Adr1   55   Treasurer or Responsible Officer Street 1
34 O    Tres_Adr2   55   Treasurer or Responsible Officer Street 2
35 C    Tres_City   30   Treasurer or Responsible Officer City
36 C    Tres_ST      2   Treasurer or Responsible Officer State
37 C    Tres_ZIP4   10   Treasurer or Responsible Officer ZIP+4
38 O    Tres_Phon   20   Treasurer or Responsible Officer Phone
39 O    Tres_FAX    20   FAX Phone Number {not mapped to present FPPC forms}
40 O    Tres_Email  60   Email Address    {not mapped to present FPPC forms}

41 C    Cmtte_Type   1   Type of Recipient Committee  (Req on F450 & F460)
                         Value: C = Cand/Officeholder Controlled Cmtte [460]
                                P = Cand/Officeholder Primarily Formed [450|460]
                                B = Ballot Measure Committee        [450|460]
                                G = General Purpose Committee       [450|460]

42 C    Control_YN   1   Controlled Committee? (Yes/No)
                         (Required on F450, F460/Cmtte_Type=B)
43 C    Sponsor_YN   1   Sponsored Committee? (Yes/No)
                         (Required on F450, F460/Cmtte_Type=[B|G])
44 C    PrimFrm_YN   1   Primarily Formed Committee? (Yes/No)
                         (Required on F460/Cmtte_Type=B)
45 C    BrdBase_YN   1   Broad Based Committee? (Yes/No)
                         (Required on F450 & F460/Cmtte_Type=G)

46 C    AmendExp_1 100   Amendment Explanation line 1  ( Req if Report_Num > 0 )
47 O    AmendExp_2 100   Amendment Explanation line 2  < and if Form_Type=F460 )
48 O    AmendExp_3 100   Amendment Explanation line 3
```

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS - VARIABLE PORTIONS
===

Note: Remainder of CVR record starting with Field #49 is
       parsed depending on the value contained Form_Type.

Note: Forms F425, F450, F497 & F498 do not use variable part of CVR layout.

------ Following variable fields used when Form_Type=F401 ------------------

```
  R{x}              Max
# C{x} Field Name   Len  Description
----- ----------   ---  -----------
49 O   Rpt_Att_CB    1   Committee Report "Attached" check-box
50 C   Cmtte_ID      9   Committee ID (Filer_ID) of Recipient Committee
51 C   ReportName    3   Campaign Disclosure Statement - Value: [450|460|461]
52 C   RptFromDt     8   Campaign Disclosure Statement - Period From Date
53 C   RptThruDt     8   Campaign Disclosure Statement - Period Through Date
```

------ Following variable fields used when Form_Type=F461 ------------------

```
  R{x}              Max
# C{x} Field Name   Len  Description
----- ----------   ---  -----------
49 O   EmplBus_CB    1   Employer/Business info included check-box
50 C   Bus_Name    200   Name of Employer/Business
51 C   Bus_Adr1     55   Employer/Business Street 1
52 O   Bus_Adr2     55   Employer/Business Street 2
53 C   Bus_City     30   Employer/Business City
54 C   Bus_ST        2   Employer/Business State
55 C   Bus_ZIP4     10   Employer/Business ZIP+4
56 C   Bus_Inter    40   Employer/Business Interests
57 O   BusAct_CB     1   Business Activity info included check-box
58 C   BusActvity   90   Business Activity description
59 O   Assoc_CB      1   Association Interests info included check-box
60 C   Assoc_Int    90   Association Interests description
61 O   Other_CB      1   Other Entity Interests info included check-box
62 C   Other_Int    90   Other Entity Interests description
```

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS - VARIABLE PORTIONS (Continued)
===

------ Following variable fields used when Form_Type =[F460|465|496] -----

```
  R{x}           Max
# C{x}  Field Name  Len  Description
-----  ----------  ---  -----------
49 R   Cand_NamL   200  Candidate/Officeholder's Last name
50 R   Cand_NamF    45  Candidate/Officeholder's First name
51 O   Cand_NamT    10  Candidate/Officeholder's Prefix or Title
52 O   Cand_NamS    10  Candidate/Officeholder's Suffix
53 R   Cand_Adr1    55  Candidate/Officeholder Street 1
54 O   Cand_Adr2    55  Candidate/Officeholder Street 2
55 R   Cand_City    30  Candidate/Officeholder City
56 R   Cand_ST       2  Candidate/Officeholder State
57 R   Cand_ZIP4    10  Candidate/Officeholder ZIP+4
58 O   Cand_Phon    20  Candidate/Officeholder Phone
59 O   Cand_FAX     20  FAX Phone Number {not mapped to present FPPC forms}
60 O   Cand_Email   60  Email Address    {not mapped to present FPPC forms}
61 C   Bal_Name    200  Ballot Measure Name
62 C   Bal_Num       3  Ballot Number or Letter
63 C   Bal_Juris    40  Jurisdiction of Ballot Measure
64 C   Office_Cd     3  Office Sought  (See table of code in Overview)
65 C   Offic_Dscr   40  Office Sought Description  (Req. if Office_Cd=OTH)
66 C   Juris_Cd      3  Office Jurisdiction Code    Values:  STW=Statewide;
                            SEN=Senate District; ASM=Assembly District;
                            BOE=Board of Equalization District;
                            CIT=City; CTY=County; LOC=Local; OTH=Other
67 C   Juris_Dscr   40  Office Jurisdiction Description
                          (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
68 C   Dist_No       3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
69 O   Off_S_H_Cd    1  Office Sought/Held Code:  H=Held; S=Sought
70 R   Sup_Opp_Cd    1  Support/Oppose?  Values: S; O
```

Code F425/Part-1 & F450/Part-3 Name/Address info for Assistant Treasurer on
      CVR2 records with CVR2.Entity_Cd='ATR'.

Code F460 Name/Addr info for Assistant Treasurer on CVR2 records with
      CVR2.Entity_Cd='ATR' and CVR2.F460_Part='3'.
Code ADDITIONAL F460/Part-4a Officeholder/Candidate info on CVR2 records with
      CVR2.Entity_Cd='CAO' and CVR2.F460_Part='4a'.
Code F460/Part-4b Name/Addr info for Related Committees on CVR2 records with
      CVR2.Entity_Cd=['COM'|'CTL'|'RCP'] and CVR2.F460_Part='4b'.
Code ADDITIONAL F460/Part-5a Ballot Measure info on CVR2 records with
      CVR2.Entity_Cd='BNM' and CVR2.F460_Part='5a'.
Code F460/Part-5b Officeholder/Candidate/Proponent info on CVR2 records with
      CVR2.Entity_Cd=['CAO'|'PRO'] and CVR2.F460_Part='5b'.
Code F460/Part-6 Name/Addr info for Candidate/Officeholder on CVR2 records with
      CVR2.Entity_Cd='CAO' and CVR2.F460_Part='6'.

Code F465/Part-5 Name/Addr info for Filing Officers on CVR2 records with
      CVR2.Entity_Cd='OFF'.

COVER PAGE RECORD LAYOUT FOR F470 OFFICEHOLDER/CAND SHORT/SUPPLEMENT
==

```
  R{x}          Max
# C{x}  Field Name   Len  Description
-----   ----------   ---  -----------
01 Rx   Rec_Type       3  Record Type Value: CVR

02 Rx   Form_Type      4  Type of Filing or Form set.  Value: F470

03 Rx   Filer_ID       9  Committee ID number of Filer

04 O    Entity_Cd      3  Values:  CAO - Candidate/Office-holder

05 Rx   Filer_NamL   200  Filer's Last name
06 R    Filer_NamF    45  Filer's First name(s) (Required for persons)
07 O    Filer_NamT    10  Filer's Prefix or Title
08 O    Filer_NamS    10  Filer's Suffix

09 Rx   Report_Num     3  Report Number - Values: 000     - Original Report
                                                  001-999 - Amended Rpt #1-#999

10 Rx   Rpt_Date       8  Date this report is filed

11 R    Cand_Adr1     55  Street 1 of Filing Candidate/Officeholder
12 O    Cand_Adr2     55  Street 2 of Filing Candidate/Officeholder
13 R    Cand_City     30  City of Filing Candidate/Officeholder
14 R    Cand_ST        2  State of Filing Candidate/Officeholder
15 R    Cand_ZIP4     10  ZIP+4 of Filing Candidate/Officeholder
16 O    Cand_Phon     20  Phone of Filing Candidate/Officeholder
17 O    Cand_FAX      20  FAX Phone Number {not mapped to present FPPC forms}
18 O    Cand_Email    60  Email Address     {not mapped to present FPPC forms}

19 R    Office_Cd      3  Office Sought  (See table of code in Overview)
20 C    Offic_Dscr    40  Office Sought Description  (Req. if Office_Cd=OTH)
21 R    Juris_Cd       3  Office Jurisdiction Code     Values:  STW=Statewide;
                                 SEN=Senate District; ASM=Assembly District;
                                 BOE=Board of Equalization District;
                                 CIT=City; CTY=County; LOC=Local; OTH=Other
22 C    Juris_Dscr    40  Office Jurisdiction Descrip
                           (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
23 C    Dist_No        3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
24 O    Off_S_H_Cd     1  Office Sought/Held Code:  H=Held; S=Sought

25 C    Elect_Date     8  Date of the General Election  (Req. in even years)

26 O    Date_1000      8  Date Contribs Totaling 1,000 or more Received
```

Code F470/Part-4 Name/Addr info for Related Committees on CVR2 records with
      CVR2.Entity_Cd=['COM'|'CTL'|'RCP'].

COVER PAGE - {{2} ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT
==


```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------

01 Rx  Rec_Type     4  Record Type Value: CVR2

02 Rx  Form_Type    4  Form_Type (must equal Form_Type in CVR record)
                       Values:  F425; F450; F460; F465; F470;
                                {F400; F410 - See Section 2};
                                {F625; F635 - See Section 3};
                                {F601; F602; F603 - See Section 4}

03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item
```


Note: Remainder of CVR2 record is parsed depending on value of Form_Type.

Note: See Section 2 for CVR2 layouts used with F400 & F410 filings.

       See Section 3 for CVR2 layouts used with F625 & F635 filings.

       See Section 4 for CVR2 layouts used with F601, F602 & F603 filings.

------ Following variable F465 {Part V} fields used when Form_Type=F465 ------


```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------

04 O   Entity_Cd    3  Values: CAO - Candidate/Officeholder
                               POF - Principal (filing) officer

05 R   Title       90  Official Title of Filing Officer

06 R   Mail_Adr1   55  Address
07 O   Mail_Adr2   55  Optional 2nd line of Address
08 R   Mail_City   30  City
09 R   Mail_ST      2  State code
10 R   Mail_ZIP4   10  Zip+4
```

```
 COVER PAGE - {{2} ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Cont.)
 ============================================================================

 ------ Following fields used for F425 Part/1; F450 Part/3; F460 (Parts 3, 4a,
 ------ 4b, 5a, 5b & 6) and F470/Part IV when Form_Type=[F425|F450|F460|F470].

   R{x}            Max
 # C{x}  Field Name Len  Description
 -----  ---------- ---  -----------
 04 Rx   Entity_Cd    3  Values:
                            ATR - Assistant Treasurer (F425-P1, F450-P3, F460-P3)
                            CAO - Cand/Officeholder (F460-P4a*, F460-P5b, F460-P6)
                            COM - Committee (F460-P4b & F470-P4)
                            CTL - Controlled Cmtte (F460-P4b & F470-P4)
                            RCP - Recipient Cmtte (F460-P4b & F470-P4)
                            PRO - Proponent (F460-P5b)
                            BNM - Ballot Measure (F460-P5a*)
                               * CVR2 record(s) used for ADDITIONAL entries
                                 on F460 Part-4a and F460 Part-5a (if any).
 05 Cx   F460_Part    2  Part of 460 cover page coded on this CVR2 record.
                         Values:  3, 4a, 4b, 5a, 5b, or 6. (Req on F460 filings)
                         (note:  4a/4b & 5a/5b are "top/bottom" of Parts 4 & 5)
 06 C    Cmte_ID      9  Committee ID  (Req. when Entity_Cd=[COM|CTL|RCP)
 07 R    Enty_NamL  200  Entity [Last] Name (Committee, Candidate, etc.)
 08 C    Enty_NamF   45  Entity's First name  (Req. when Entity_Cd=CAO)
 09 O    Enty_NamT   10  Entity's Prefix or Title
 10 O    Enty_NamS   10  Entity's Suffix
 11 C    Enty_Adr1   55  Street 1 of Filing Committee
 12 O    Enty_Adr2   55  Street 2 of Filing Committee
 13 C    Enty_City   30  City of Filing Committee
 14 C    Enty_ST      2  State of Filing Committee
 15 C    Enty_ZIP4   10  ZIP+4 of Filing Committee
 16 O    Enty_Phon   20  Phone of Filing Committee
 17 O    Enty_FAX    20  FAX Phone Number {not mapped to present FPPC forms}
 18 O    Enty_Email  60  Email Address    {not mapped to present FPPC forms}
 19 C    Tres_NamL  200  Treasurer's Last name
 20 C    Tres_NamF   45  Treasurer's First name
 21 O    Tres_NamT   10  Treasurer's Prefix or Title
 22 O    Tres_NamS   10  Treasurer's Suffix
 23 C    Control_YN   1  Controlled Committee?  Yes/No   (Req. on F460/P4)
 24 C    Office_Cd    3  Office Sought  (See table of code in Overview)
 25 C    Offic_Dscr  40  Office Sought Description  (Req. if Office_Cd=OTH)
 26 C    Juris_Cd     3  Office Jurisdiction Code    Values:  STW=Statewide;
                                 SEN=Senate District; ASM=Assembly District;
                                 BOE=Board of Equalization District;
                                 CIT=City; CTY=County; LOC=Local; OTH=Other
 27 C    Juris_Dscr  40  Office Jurisdiction Descrip
                         (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
 28 C    Dist_No      3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
 29 C    Off_S_H_Cd   1  Office Sought/Held Code:  H=Held; S=Sought
 30 C    Bal_Name   200  Ballot Measure Name
 31 C    Bal_Num      7  Ballot Number or Letter
 32 C    Bal_Juris   40  Jurisdiction
 33 C    Sup_Opp_Cd   1  Support/Oppose?  Values: S; O
```

COVER PAGE (VERIFICATION INFORMATION) RECORD LAYOUT
===


```
   R{x}          Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: CVR3

02 Rx  Form_Type    4  Form_Type (must equal Form_Type in CVR record)
                       Values: F401; F425; F450; F460; F461; F465; F470;
                            {F400; F402; F410 - see Sect. 2}

03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item

04 Rx  Entity_Cd    3  Values: TRE - Treasurer
                               ATR - Assistant Treasurer
                               CAO - Candidate/Office-holder
                               OFF - Officer (Responsible)
                               PRO - Proponent (F460 - Bal Measure Cmtte)
                               SPO - Sponsor   (F460 - Gen Purpose Cmtte)

05 R   Sig_Date     8  Date when signed

06 O   Sig_Loc     45  City and State where signed

07 R   Sig_NamL   200  Signer's "as signed" Last name
08 R   Sig_NamF    45  Signer's "as signed" First name
09 O   Sig_NamT    10  Signer's "as signed" Prefix or Title
10 O   Sig_NamS    10  Signer's "as signed" Suffix
```

AMENDMENT INFORMATION (a.k.a.. Form 405; Part II)
===

```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: F405

02 Rx  Form_Type    4  Form_Type (must equal Form_Type in CVR record)
                          Values:  F450; F460; F461

03 Rx  Exec_Date    8  Date this Amendment executed on

04 Rx  From_Date    8  Report Period From Date of Original Report

05 Rx  Thru_Date    8  Report Period To/Through Date of Original Report


------ At least one of the Check-boxes below must be "checked"
06 O   Cover_CB     1  Cover Page is amended check-box
07 O   Alloc_CB     1  Allocation Page is amended check-box
08 O   SumPg_CB     1  Summary Page is amended check-box
09 O   Sched_CB     1  Schedule(s) are amended check-box
10 Cx  Sched_Lst   40  List of amended Schedule(s)  (Req. if Sched_CB=X)
11 O   Parts_CB     1  Part(s) are amended check-box
12 Cx  Parts_Lst   40  List of amended Part(s)      (Req. if Parts_CB=X)


13 Rx  Amend_Txt1 330  Description of changes.
                          (6 lines of 55 char 9pt text)
```


CONTRIBUTION INFORMATION (a.k.a.. Form 495; Part II)
==

```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: F495

02 Rx  Form_Type    4  Form_Type (must equal Form_Type in CVR record)
                          Values:  F450; F460

03 R   Elect_Date   8  Date of the General Election (same as on CVR rec)

04 Rx  ElectJuris  40  Jurisdiction of the Election

05 Rx  ContribAmt  12  Contribution Amount (6mos prior - 17days before)
```

SUMMARY TOTALS RECORD LAYOUT
===========================

```
  R{x}              Max
# C{x} Field Name   Len  Description
-----  ----------   ---  -----------
01 Rx  Rec_Type       4  Record Type Value: SMRY
02 Rx  Form_Type      8  Name of Filing Form or Schedule Name
03 Rx  Line_Item      8  Line Number of Summary Total
04 o   Amount_A      12  Summary Amount - (Column A on some forms)
05 o   Amount_B      12  Summary Amount - Column B
06 o   Amount_C      12  Summary Amount - Column C
```

Note: Amount(s) may have a null or zero value if there is no dollar
        total to be conveyed. SMRY records with null/zero Amount(s) do
        not have to be coded within a filing. Amount(s) are assumed to
        be zero in the absence of a SMRY record.

Examples:
=========

F460 SMRY records (when needed) are coded with these Form_Type/Line# values:


```
SMRY line                       through  SMRY line
===========================     =======  ============================
SMRY,F460,1,Amt_A,Amt_B,Amt_C    -->     SMRY,F460,11,Amt_A,Amt_B,Amt_C
SMRY,F460,12,Amt_A               -->     SMRY,F460,19,Amt_A
SMRY,F460,20,Amt_A,Amt_B         -->     SMRY,F460,21,Amt_A,Amt_B

SMRY,A,1,Amt_A                   -->     SMRY,A,3,Amt_A
SMRY,B1,1,Amt_A                  -->     SMRY,B1,3,Amt_A
SMRY,B2,4,Amt_A                  -->     SMRY,B2,7,Amt_A
SMRY,B2,d,Amt_A
SMRY,B3,0,Amt_A  {although there is no B3 line-item#, code Line_Item=0 (zero)}
SMRY,C,1,Amt_A                   -->     SMRY,C,3,Amt_A
SMRY,D,1,Amt_A                   -->     SMRY,D,3,Amt_A
SMRY,E,1,Amt_A                   -->     SMRY,E,4,Amt_A
SMRY,F,1,Amt_A                   -->     SMRY,F,3,Amt_A
SMRY,H1,1,Amt_A                  -->     SMRY,H1,3,Amt_A
SMRY,H2,4,Amt_A                  -->     SMRY,H2,7,Amt_A
SMRY,H2,b,Amt_A
SMRY,H3,0,Amt_A  {although there is no H3 line-item#, code Line_Item=0 (zero)}
SMRY,I,1,Amt_A                   -->     SMRY,I,4,Amt_A
```

F450 SMRY records (when needed) are coded with these Form_Type/Line# values:

```
SMRY line                     through  SMRY line
=========================  =======  ==========================
SMRY,F450,1,Amt_A              -->     SMRY,F450,15,Amt_A
```

F461 SMRY records (when needed) are coded with these Form_Type/Line# values:

```
SMRY line                     through  SMRY line
=========================  =======  ==========================
SMRY,F461,1,Amt_A              -->     SMRY,F461,5,Amt_A
```

F465 SMRY records (when needed) are coded with these Form_Type/Line# values:

```
SMRY line                     through  SMRY line
=========================  =======  ==========================
SMRY,F465,1,Amt_A              -->     SMRY,F465,3,Amt_A
```

F401 SMRY records (when needed) are coded with these Form_Type/Line# values:

```
SMRY line                     through  SMRY line
=========================  =======  ==========================
SMRY,F401,1,Amt_A,Amt_B        -->     SMRY,F401,2,Amt_A,Amt_B
SMRY,401A,1,Amt_A              -->     SMRY,401A,3,Amt_A
SMRY,401B,1,Amt_A              -->     SMRY,401B,3,Amt_A

SMRY,401B-1,0,Amt_A            {B-1 has no line#, code a '0' (zero)}
```

RECEIPTS SCHEDULES (A, C, I, A-1 and F401A)
==

```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: RCPT


02 Rx  Form_Type    5  Sched Name:  A = Sched A / Monetary;
                                    C = Sched C / Non-monetary;
                                    I = Sched I / Misc. to Cash;
                                    A-1 = Sched A-1 / Trans Contribs
                                    F401A = Payments Received


03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item


04 R   Entity_Cd    3  Values: [COM|RCP] - Recipient Committee
                                IND - Individual;
                                OTH - Other (e.g. a Bus, Cmtte, Org, ...)


05 C   Ctrib_NamL 200  Contributor's Last name
06 C   Ctrib_NamF  45  Contributor's First name
07 O   Ctrib_NamT  10  Contributor's Prefix or Title
08 O   Ctrib_NamS  10  Contributor's Suffix
09 C   Ctrib_Adr1  55  Address of Contributor
10 O   Ctrib_Adr2  55  Optional 2nd line of Address
11 C   Ctrib_City  30  City
12 C   Ctrib_ST     2  State code
13 C   Ctrib_ZIP4  10  Zip+4


14 C   Ctrib_Emp  200  Employer (Sched A, C - Req. if Entity = 'IND')
15 C   Ctrib_Occ   60  Occupation (Sched A, C - Req. if Entity = 'IND')
16 O   Ctrib_Self   1  Check Box:  Self Employed?


17 O   Tran_Type    1  Transaction Type - Values:  T = Third Party Repayment;
                          F = Forgiven Loan;  R = Returned (Negative Amount?)
18 R   Rcpt_Date    8  Date item Received  (or Begin date of date range)
19 O   Date_Thru    8  End-date of date range for Items received
20 R   Amount      12  Amount (Monetary/Inkind/Promise) Received
                       A-1 Amount Transferred from Contributor (Sched A-1)
21 C   Cum_YTD     12  Cumulative YTD Amount  (Sched A, 401A, A-1)
                        (Note:  Cum Amt. for Special Elect on Sched A-1)
22 C   Cum_Oth     12  Cumulative "Other"  (Sched A, A-1)
                        (Note:  Cum Amt. for Special Runoff Elect on Sched A-1)
23 C   Ctrib_Dscr  90  Description of Goods/Services Rcvd.  (Sched C, I)


24 C   Cmte_ID      9  Committee ID  (If [COM|RCP] & no ID#, Treas info Req.)


25 C   Tres_NamL  200  Treasurer's Last name      (Req if [COM|RCP] & no ID#)
26 C   Tres_NamF   45  Treasurer's First name     (Req if [COM|RCP] & no ID#)
27 O   Tres_NamT   10  Treasurer's Prefix or Title
28 O   Tres_NamS   10  Treasurer's Suffix
29 C   Tres_Adr1   55  Treasurer Street 1         (Req if [COM|RCP] & no ID#)
30 O   Tres_Adr2   55  Treasurer Street 2
```

```
RECEIPTS SCHEDULES  (Continued)
==============================

   R{x}             Max
 # C{x} Field Name  Len  Description
 ----- ----------  ---  -----------
 31 C   Tres_City    30  Treasurer City
 32 C   Tres_ST       2  Treasurer State
 33 C   Tres_ZIP4    10  Treasurer Phone


------ Intermediary fields (Intr_NamL - Intr_Self) do not apply to F401A
 34 O   Intr_NamL   200  Intermediary's Last name
 35 O   Intr_NamF    45  Intermediary's First name
 36 O   Intr_NamT    10  Intermediary's Prefix or Title
 37 O   Intr_NamS    10  Intermediary's Suffix
 38 C   Intr_Adr1    55  Intermediary Street 1
 39 O   Intr_Adr2    55  Intermediary Street 2
 40 C   Intr_City    30  Intermediary City
 41 C   Intr_ST       2  Intermediary State
 42 C   Intr_ZIP4    10  Intermediary ZIP+4
 43 C   Intr_Emp    200  Employer (Sched A, C)
 44 C   Intr_Occ     60  Occupation (Sched A, C)
 45 O   Intr_Self     1  Check Box:  Self Employed?


------ Fields 46 - 59 used on F401A -------------------------------------
 46 C   Cand_NamL   200  Candidate's Last name
 47 C   Cand_NamF    45  Candidate's First name
 48 O   Cand_NamT    10  Candidate's Prefix or Title
 49 O   Cand_NamS    10  Candidate's Suffix
 50 C   Office_Cd     3  Office Sought  (See table of code in Overview)
 51 C   Offic_Dscr   40  Office Sought Description  (Req. if Office_Cd=OTH)
 52 C   Juris_Cd      3  Office Jurisdiction Code    Values:  STW=Statewide;
                              SEN=Senate District; ASM=Assembly District;
                              BOE=Board of Equalization District;
                              CIT=City; CTY=County; LOC=Local; OTH=Other
 53 C   Juris_Dscr   40  Office Jurisdiction Descrip
                         (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
 54 C   Dist_No       3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
 55 O   Off_S_H_Cd    1  Office Sought/Held Code:  H=Held; S=Sought
 56 O   Bal_Name    200  Ballot Measure Name
 57 O   Bal_Num       7  Ballot Number or Letter
 58 O   Bal_Juris    40  Jurisdiction
 59 C   Sup_Opp_Cd    1  Support/Oppose?  Values: S; O  (F401)


 60 O   Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
 61 O   Memo_RefNo   20  Reference to text contained in a TEXT record.

 62 O   BakRef_TID   20  Back Reference to a Tran_ID of a "parent" record

 63 O   XRef_SchNm    2  Related item is included on Sched 'B2' or 'F'
 64 O   XRef_Match    1  X = Related item on other Sched has same Tran_ID
```

EXPENDITURE SCHEDULES (D, E, G, F450P5, F461P5, F465P3)
===

```
  R{x}            Max
# C{x}  Field Name  Len  Description
-----  ----------  ---  -----------
01 Rx  Rec_Type      4  Record Type Value: EXPN

02 Rx  Form_Type     6  Schedule Name/ID
                        Values:  D = Sched D / Summary of Expend Sup/Opp ...
                                 E = Sched E / Expenditures made
                                 G = Sched G / Payments made on Behalf
                            F450P5 = F450 / Part 5 Exp & Contrib made;
                            F461P5 = F461 / Part 5 Exp & Contrib made
                            F465P3 = F465 / Independent Expenditures Made

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item

04 R   Entity_Cd     3  Values: [COM|RCP] - Recipient Committee;
                                 IND - Individual;
                                 OTH - Other

05 C   Payee_NamL  200  Payee's Last name
06 C   Payee_NamF   45  Payee's First name
07 O   Payee_NamT   10  Payee's Prefix or Title
08 O   Payee_NamS   10  Payee's Suffix
09 C   Payee_Adr1   55  Address of Payee
10 O   Payee_Adr2   55  Optional 2nd line of Address
11 C   Payee_City   30  City
12 C   Payee_ST      2  State code
13 C   Payee_ZIP4   10  Zip+4

14 C   Expn_Date     8  Date of Expenditure  (Note:  Date not on Sched E & G)
15 R   Amount       12  Amount of Payment
16 C   Cum_YTD      12  Cumulative / YTD Amt (No Cumulatives on Sched E & G)
17 C   Cum_Oth      12  Cumulative / "Other" (No Cumulatives on Sched E & G)
18 O   Expn_ChkNo   20  Check Number       (Optional)

19 C   Expn_Code     3  Expense Code  - Values: (Refer to list in Overview)
                        Note: CTB & IND need explanation & listing on Sched D
                              TRC & TRS require explanation.

20 C   Expn_Dscr    90  Purpose of Expense and/or Description/explanation

21 C   Agent_NamL  200  Agent or Ind. Contractor's Last name  (Sched G)
22 C   Agent_NamF   45  Agent or Ind. Contractor's First name
23 O   Agent_NamT   10  Agent or Ind. Contractor's Prefix or Title
24 O   Agent_NamS   10  Agent or Ind. Contractor's Suffix
```

```
EXPENSE SCHEDULES  (Continued)
==============================


  R{x}            Max
# C{x} Field Name Len Description
----- ---------- --- -----------

------ Fields 25 - 34 are NOT used on F460/Sched D ------

25 C    Cmte_ID       9  Committee ID  (If [COM|RCP] & no ID#, Treas info Req.)

26 C    Tres_NamL   200  Treasurer's Last name      (Req if [COM|RCP] & no ID#)
27 C    Tres_NamF    45  Treasurer's First name     (Req if [COM|RCP] & no ID#)
28 O    Tres_NamT    10  Treasurer's Prefix or Title
29 O    Tres_NamS    10  Treasurer's Suffix
30 C    Tres_Adr1    55  Treasurer Street 1         (Req if [COM|RCP] & no ID#)
31 O    Tres_Adr2    55  Treasurer Street 2
32 C    Tres_City    30  Treasurer City
33 C    Tres_ST       2  Treasurer State
34 C    Tres_ZIP4    10  Treasurer ZIP+4


------ Fields 35 - 48 used on F450/Part5, F460/Sched D & F461/Part5 ------
35 C    Cand_NamL   200  Candidate's Last name
36 C    Cand_NamF    45  Candidate's First name
37 O    Cand_NamT    10  Candidate's Prefix or Title
38 O    Cand_NamS    10  Candidate's Suffix
39 C    Office_Cd     3  Office Sought  (See table of code in Overview)
40 C    Offic_Dscr   40  Office Sought Description  (Req. if Office_Cd=OTH)
41 C    Juris_Cd      3  Office Jurisdiction Code    Values:  STW=Statewide;
                                   SEN=Senate District; ASM=Assembly District;
                                   BOE=Board of Equalization District;
                                   CIT=City; CTY=County; LOC=Local; OTH=Other
42 C    Juris_Dscr   40  Office Jurisdiction Descrip
                           (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
43 C    Dist_No       3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
44 O    Off_S_H_Cd    1  Office Sought/Held Code:  H=Held; S=Sought
45 O    Bal_Name    200  Ballot Measure Name
46 O    Bal_Num       7  Ballot Number or Letter
47 O    Bal_Juris    40  Jurisdiction
48 C    Sup_Opp_Cd    1  Support/Oppose?  Values: S; O  (F450, F461)


49 O    Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
50 O    Memo_RefNo   20  Reference to text contained in a TEXT record.

51 O    BakRef_TID   20  Back Reference to a Tran_ID of a "parent" record
52 O    G_From_E_F    1  Back Reference from Sched G to Sched 'E' or 'F'?

53 O    XRef_SchNm    2  Related item is included on Sched 'C' or 'H2'
54 O    XRef_Match    1  X = Related item on other Sched has same Tran_ID
```

ACCRUED EXPENSES (UNPAID BILLS) SCHEDULE (F)
==


```
   R{x}           Max
# C{x} Field Name  Len  Description
----- ----------  ---  -----------
01 Rx  Rec_Type      4  Record Type Value: DEBT

02 Rx  Form_Type     1  Schedule Name/ID
                        Value:  F = Sched F / Accrued Expenses

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item

04 R   Entity_Cd     3  Values: [COM|RCP] - Recipient Committee;
                                 IND - Individual;
                                 OTH - Other

05 R   Payee_NamL  200  Payee's Last name
06 C   Payee_NamF   45  Payee's First name
07 O   Payee_NamT   10  Payee's Prefix or Title
08 O   Payee_NamS   10  Payee's Suffix
09 R   Payee_Adr1   55  Address of Payee
10 O   Payee_Adr2   55  Optional 2nd line of Address
11 R   Payee_City   30  City
12 R   Payee_ST      2  State code
13 R   Payee_ZIP4   10  Zip+4

14 R   Beg_Bal      12  Outstanding balance at beginning of this period

15 C   Amt_Incur    12  Amount incurred this period

16 C   Amt_Paid     12  Amount paid this period

17 C   End_Bal      12  Outstanding balance at close of this period

18 C   Expn_Code     3  Expense Code  - Values: (Refer to list in Overview)
                        Note: CTB & IND need explanation & listing on Sched D
                              TRC & TRS require explanation.

19 C   Expn_Dscr    90  Purpose of Expense and/or Description/explanation
```

ACCRUED EXPENSES SCHEDULE   (Continued)
======================================


```
   R{x}           Max
# C{x}  Field Name  Len  Description
-----  ----------  ---  -----------
20 C    Cmte_ID       9  Committee ID  (If [COM|RCP] & no ID#, Treas info Req.)

21 C    Tres_NamL   200  Treasurer's Last name      (Req if [COM|RCP] & no ID#)
22 C    Tres_NamF    45  Treasurer's First name     (Req if [COM|RCP] & no ID#)
23 O    Tres_NamT    10  Treasurer's Prefix or Title
24 O    Tres_NamS    10  Treasurer's Suffix
25 C    Tres_Adr1    55  Treasurer Street 1         (Req if [COM|RCP] & no ID#)
26 O    Tres_Adr2    55  Treasurer Street 2
27 C    Tres_City    30  Treasurer City
28 C    Tres_ST       2  Treasurer State
29 C    Tres_ZIP4    10  Treasurer ZIP+4

30 O    Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
31 O    Memo_RefNo   20  Reference to text contained in a TEXT record.

32 O    BakRef_TID   20  Back Reference to a Tran_ID of a "parent" record

33 O    XRef_SchNm    2  Related item is included on Sched 'C'
34 O    XRef_Match    1  X = Related item on other Sched has same Tran_ID
```

LOAN SCHEDULES / RECEIVED (B1, B2, B3) & MADE (H1, H2, H3)
===


```
  R{x}        Max
# C{x} Field Name  Len  Description
----- ---------- --- -----------
01 Rx  Rec_Type     4  Record Type Value: LOAN

02 Rx  Form_Type    2  Schedule Name/ID
                       Values:  B1 = Sched B Part I / Loans Received;
                                B2 = Sched B Part II / Repayments;
                                B3 = Sched B Part III / Outstanding Bal;
                                H1 = Sched H, Part I / Loans Made;
                                H2 = Sched H, Part II / Repayments Rcvd;
                                H3 = Sched H, Part III / Outstanding Loan;

03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item

04 C   Loan_TYPE    3  Loan Type: Sched B1 Values:  B1L=Lender; B1G=Guarantor
                                  Sched B2 Values:  B2R=Repay;  B2F=Forgiven
                                                    B2T=Third party payment
                                  Sched H2 Values:  H2R=Repay;  H2F=Forgiven
                                                    H2T=Third party payment
                                  (Not used for Sched B3, H1, and H3)

05 C   Entity_Cd    3  Values: [COM|RCP] - Recipient Committee;  (Req. on B1)
                               IND - Individual;
                               OTH - Other

06 R   Lndr_NamL  200  Lender's Last name
07 C   Lndr_NamF   45  Lender's First name (if a person)
08 O   Lndr_NamT   10  Lender's Prefix or Title
09 O   Lndr_NamS   10  Lender's Suffix
10 R   Loan_Adr1   55  Address Line 1
11 R   Loan_Adr2   55  Address Line 2
12 R   Loan_City   30  City
13 R   Loan_ST      2  State Code
14 R   Loan_ZIP4   10  ZIP+4
```

LOAN SCHEDULES / RECEIVED & MADE (Continued)
===


```
  R{x}             Max
# C{x} Field Name  Len  Description
----- ---------- --- -----------

Schedule B; Part I definitions (B1) ------------------------------

15 R   Loan_Date1   8  B1 - Date Loan Received (Original Date)
16 R   Loan_Date2   8  B1 - Date Loan Due
17 R   Loan_Amt1   12  B1 - Loan Amount / Guarantor Amount
18 N/A Loan_Amt2   12  N/A (Not used for Sched B; Part I)
19 C   Loan_Amt3   12  B1 - Cumulative / Year-to-date
20 C   Loan_Amt4   12  B1 - Cumulative / Other
21 R   Loan_Rate   30  B1 - Interest Rate




Schedule B; Part II definitions (B2) ------------------------------

15 R   Loan_Date1   8  B2 - Original Date of Loan
16 R   Loan_Date2   8  B2 - Date Repaid/Forgiven (see Loan_TYPE)
17 C   Loan_Amt1   12  B2 - Repaid/Forgiven Amount  (Req if no Loan_Amt3)
18 R   Loan_Amt2   12  B2 - Outstanding Principal
19 C   Loan_Amt3   12  B2 - Interest Paid        (Req if no Loan_Amt1)
20 N/A Loan_Amt4   12  N/A (Not used for Sched B; Part II)
21 C   Loan_Rate   30  B2 - Int. Rate (if changed)




Schedule B; Part III definitions (B3) ----------------------------

15 R   Loan_Date1   8  B3 - Original Date of Loan
16 N/A Loan_Date2   8  N/A (Not used for Sched B; Part III)
17 R   Loan_Amt1   12  B3 - Original Amt. of Loan
18 R   Loan_Amt2   12  B3 - Unpaid Balance
19 R   Loan_Amt3   12  B3 - Unpaid Interest
20 N/A Loan_Amt4   12  N/A (Not used for Sched B; Part III)
21 N/A Loan_Rate   30  N/A (Not used for Sched B; Part III)
```

```
  LOAN SCHEDULES / RECEIVED & MADE  (Continued)
  ===============================================


    R{x}              Max
  # C{x} Field Name   Len  Description
  ----- ---------- --- -----------

  Schedule H; Part I definitions (H1) ------------------------------

  15 R    Loan_Date1   8  H1 - Date Loan Made (Original Date)
  16 R    Loan_Date2   8  H1 - Date Loan Due
  17 R    Loan_Amt1   12  H1 - Amount of Loan
  18 N/A  Loan_Amt2   12  N/A (Not used for Sched H; Part I)
  19 N/A  Loan_Amt3   12  N/A (Not used for Sched H; Part I)
  20 N/A  Loan_Amt4   12  N/A (Not used for Sched H; Part I)
  21 R    Loan_Rate   30  H1 - Interest Rate




  Schedule H; Part II definitions (H2) ------------------------------

  15 R    Loan_Date1   8  H2 - Original Date of Loan
  16 R    Loan_Date2   8  H2 - Date Repaid/Forgiven (see Loan_TYPE)
  17 C    Loan_Amt1   12  H2 - Repaid/Forgiven Amount     (Req if no Loan_Amt3)
  18 R    Loan_Amt2   12  H2 - Outstanding Principal
  19 C    Loan_Amt3   12  H2 - Interest Received          (Req if no Loan_Amt1)
  20 N/A  Loan_Amt4   12  N/A (Not used for Sched H; Part II)
  21 C    Loan_Rate   30  H2 - Int. Rate (if changed)




  Schedule H; Part III definitions (H3) -----------------------------

  15 R    Loan_Date1   8  H3 - Original Date of Loan
  16 N/A  Loan_Date2   8  N/A (Not used for Sched H; Part III)
  17 R    Loan_Amt1   12  H3 - Original Amt. of Loan
  18 R    Loan_Amt2   12  H3 - Unpaid Principal
  19 R    Loan_Amt3   12  H3 - Unpaid Interest
  20 N/A  Loan_Amt4   12  N/A (Not used for Sched H; Part III)
  21 N/A  Loan_Rate   30  N/A (Not used for Sched H; Part III)
```

```
 LOAN SCHEDULES / RECEIVED & MADE  (Continued)
 ============================================


   R{x}           Max
 # C{x} Field Name Len  Description
 -----  ---------- ---  -----------

 22 C   Loan_EMP   200  Employer    (If Sched B1, Part I)
 23 C   Loan_OCC    60  Occupation  (If Sched B1, Part I)
 24 O   Loan_Self    1  Check Box:  Self Employed?


 ------ Fields 25 - 34 are only used on F460/Sched B1 ------

 25 C   Cmte_ID      9  Committee ID  (If [COM|RCP] & no ID#, Treas info Req.)

 26 C   Tres_NamL  200  Treasurer's Last name  (Req if B1, [COM|RCP] & no ID#)
 27 C   Tres_NamF   45  Treasurer's First name (Req if B1, [COM|RCP] & no ID#)
 28 O   Tres_NamT   10  Treasurer's Prefix or Title
 29 O   Tres_NamS   10  Treasurer's Suffix
 30 C   Tres_Adr1   55  Treasurer Street 1     (Req if B1, [COM|RCP] & no ID#)
 31 O   Tres_Adr2   55  Treasurer Street 2
 32 C   Tres_City   30  Treasurer City
 33 C   Tres_ST      2  Treasurer State
 34 C   Tres_ZIP4   10  Treasurer ZIP+4


 35 O   Intr_NamL  200  Intermediary's Last name
 36 O   Intr_NamF   45  Intermediary's First name
 37 O   Intr_NamT   10  Intermediary's Prefix or Title
 38 O   Intr_NamS   10  Intermediary's Suffix
 39 C   Intr_Adr1   55  Intermediary Street 1
 40 O   Intr_Adr2   55  Intermediary Street 2
 41 C   Intr_City   30  Intermediary City
 42 C   Intr_ST      2  Intermediary State
 43 C   Intr_ZIP4   10  Intermediary ZIP+4

 44 O   Memo_Code    1  Memo Amount?  (Date/Amount are informational only)
 45 O   Memo_RefNo  20  Reference to text contained in a TEXT record.

 46 O   BakRef_TID  20  Back Reference to a Tran_ID of a "parent" record

 47 O   XRef_SchNm   2  Related item is included on Sched 'A' or 'E'
 48 O   XRef_Match   1  'X' = Related item on other Sched has same Tran_ID
```

```
Form 401 Payment & Other Disclosure Sched  (F401B, F401B-1, F401C, F401D)
=========================================================================

   R{x}              Max
 # C{x}  Field Name  Len  Description
 -----  ----------   ---  -----------
01 Rx   Rec_Type       4  Record Type Value: S401
02 Rx   Form_Type      7  Sched Name:  F401B = Payments Made
                                       F401B-1 = Payments Made in Behalf of
                                       F401C = Persons Receiving $1000 +
                                       F401D = Cand/Measure not on Sched F401A
03 Rx   Tran_ID       20  Transaction ID - permanent value unique to this item

04 C    Agent_NamL   200  Agent's Last name  (401B-1)
05 O    Agent_NamF    45  Agent's First name
06 O    Agent_NamT    10  Agent's Prefix or Title
07 O    Agent_NamS    10  Agent's Suffix

08 C    Payee_NamL   200  Payee's Last name
09 O    Payee_NamF    45  Payee's First name
10 O    Payee_NamT    10  Payee's Prefix or Title
11 O    Payee_NamS    10  Payee's Suffix
12 C    Payee_Adr1    55  Address
13 O    Payee_Adr2    55  Optional 2nd line of Address
14 C    Payee_City    30  City
15 C    Payee_ST       2  State code
16 C    Payee_ZIP4    10  Zip+4
17 C    Amount        12  Amount  (Sched F401B, F401B-1, F401C)
18 C    Aggregate     12  Aggregate YTD Amount  (Sched F401C)
19 C    Expn_Dscr     90  Purpose of Expense and/or Description

------ Fields 20 - 33 used on F401D -------------------------------------
20 C    Cand_NamL    200  Candidate's Last name
21 C    Cand_NamF     45  Candidate's First name
22 O    Cand_NamT     10  Candidate's Prefix or Title
23 O    Cand_NamS     10  Candidate's Suffix
24 C    Office_Cd      3  Office Sought  (See table of code in Overview)
25 C    Offic_Dscr    40  Office Sought Description  (Req. if Office_Cd=OTH)
26 C    Juris_Cd       3  Office Jurisdiction Code    Values:  STW=Statewide;
                                 SEN=Senate District; ASM=Assembly District;
                                 BOE=Board of Equalization District;
                                 CIT=City; CTY=County; LOC=Local; OTH=Other
27 C    Juris_Dscr    40  Off. Juris. Dscrip (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
28 C    Dist_No        3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
29 O    Off_S_H_Cd     1  Office Sought/Held Code:  H=Held; S=Sought
30 O    Bal_Name     200  Ballot Measure Name
31 O    Bal_Num        7  Ballot Number or Letter
32 O    Bal_Juris     40  Jurisdiction
33 C    Sup_Opp_Cd     1  Support/Oppose?  Values: S; O  (F401)

34 O    Memo_Code      1  Memo Amount?  (Date/Amount are informational only)
35 O    Memo_RefNo    20  Reference to text contained in a TEXT record.

36 O    BakRef_TID    20  Back Reference to a Tran_ID of a "parent" record
```

Form 496 Late Independent Expenditures Made
==


```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: S496

02 Rx  Form_Type    4  Schedule Name/ID
                        Value:  F496 = Independent Expenditures Made

03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item

04 C   Amount      12  Expenditure Amount

05 C   Exp_Date     8  Expenditure Date
                         (Begin date of date range for Items paid)

06 O   Date_Thru    8  End-date of date range for Items paid

07 C   Expn_Dscr   90  Purpose of Expenditure and/or Description

08 O   Memo_Code    1  Memo Amount?  (Date/Amount are informational only)
09 O   Memo_RefNo  20  Reference to text contained in a TEXT record.
```

Form 497 Late Contributions Received/Made
==

```
  R{x}            Max
# C{x} Field Name Len Description
----- ---------- --- -----------
01 Rx  Rec_Type     4 Record Type Value: S497

02 Rx  Form_Type    6 Schedule Name/ID
                      Value:  F497P1 = Late Contribution Received
                      Value:  F497P2 = Late Contribution Made

03 Rx  Tran_ID     20 Transaction ID - permanent value unique to this item

04 R   Entity_Cd    3 Values:  CAO - Candidate/Office-holder (F497P2)
                               BNM - Ballot Measure (F497P2)
                              [COM|RCP] - Recipient Committee
                               IND - Individual;
                               OTH - Other (e.g. a Bus, Cmtte, Org, ...)

05 C   Enty_NamL  200 Contributor/Recipient's Last name
06 C   Enty_NamF   45 Contributor/Recipient's First name
07 O   Enty_NamT   10 Contributor/Recipient's Prefix or Title
08 O   Enty_NamS   10 Contributor/Recipient's Suffix
09 C   Enty_Adr1   55 Address of Contributor/Recipient
10 O   Enty_Adr2   55 Optional 2nd line of Address
11 C   Enty_City   30 City
12 C   Enty_ST      2 State code
13 C   Enty_ZIP4   10 Zip+4

14 C   Ctrib_Emp  200 Employer (Sched A, C, D - Req. if Entity = 'IND')
15 C   Ctrib_Occ   60 Occupation (Sched A, C, D - Req. if Entity = 'IND')
16 O   Ctrib_Self   1 Check Box:  Self Employed?

17 C   Elec_Date    8 Date of Election (Req. if P2)
18 R   Ctrib_Date   8 Date item Received/Made
                      (Begin date of date range for Items received)
19 O   Date_Thru    8 End-date of date range for Items received
20 R   Amount      12 Amount Received/Made

21 C   Cmte_ID      9 Committee ID  (Req. if Entity_Cd=[CAO|RCP]...
                      (Absolutely Req. on F497P2 when ... [CAO|RCP].)

22 C   Cand_NamL  200 Candidate's Last name
23 C   Cand_NamF   45 Candidate's First name
24 O   Cand_NamT   10 Candidate's Prefix or Title
25 O   Cand_NamS   10 Candidate's Suffix
```

Form 497 Late Contributions Received/Made (Continued)
===

```
  R{x}              Max
# C{x}  Field Name  Len  Description
-----   ----------  ---  -----------
26 C    Office_Cd    3   Office Sought  (See table of code in Overview)
27 C    Offic_Dscr  40   Office Sought Description  (Req. if Office_Cd=OTH)
28 C    Juris_Cd     3   Office Jurisdiction Code     Values:  STW=Statewide;
                               SEN=Senate District; ASM=Assembly District;
                               BOE=Board of Equalization District;
                               CIT=City; CTY=County; LOC=Local; OTH=Other
29 C    Juris_Dscr  40   Office Jurisdiction Descrip
                           (Req. if Juris_Cd=[CIT|CTY|LOC|OTH])
30 C    Dist_No      3   Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
31 O    Off_S_H_Cd   1   Office Sought/Held Code:  H=Held; S=Sought

32 O    Bal_Name   200   Ballot Measure Name
33 O    Bal_Num      7   Ballot Number or Letter
34 O    Bal_Juris   40   Jurisdiction

35 O    Memo_Code    1   Memo Amount?  (Date/Amount are informational only)
36 O    Memo_RefNo  20   Reference to text contained in a TEXT record.
```

Form 498 Late Independent Expenditures Made
===


```
  R{x}            Max
# C{x}  Field Name  Len  Description
-----  ----------  ---  -----------
01 Rx  Rec_Type      4  Record Type Value: S498

02 Rx  Form_Type     6  Schedule Name/ID
                        Value:  F498-R = Late Payment Received From
                                F498-A = Late Payment Attributed To

                        Note:   Only one F498-R record is used per F498 filing.

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item

04 R   Entity_Cd     3  Values:  CAO - Candidate/Office-holder
                                 [COM|RCP] - Recipient Committee
                                  IND - Individual;
                                  OTH - Other (e.g. a Bus, Cmtte, Org, ...)

05 C   Cmte_ID       9  Committee ID of Payee (if CAO or [COM|RCP]
06 R   Payor_NamL  200  Payor's Last name
07 C   Payor_NamF   45  Payor's First name
08 O   Payor_NamT   10  Payor's Prefix or Title
09 O   Payor_NamS   10  Payor's Suffix
10 R   Payor_Adr1   55  Address of Payor
11 O   Payor_Adr2   55  Optional 2nd line of Address
12 R   Payor_City   30  City
13 R   Payor_ST      2  State code
14 R   Payor_ZIP4   10  Zip+4


------ Fields #15 & #19 are used when Form_Type = 'F498-R' -------------------
15 O   Employer    200  Employer   (only if Form_Type = 'F498-R')
16 O   Occupation   60  Occupation (only if Form_Type = 'F498-R')
17 O   SelfEmp_CB    1  Check Box:  Self Employed?
18 C   Date_Rcvd     8  Date Received (only if Form_Type = 'F498-R')
19 C   Amt_Rcvd     12  Amount Received (only if Form_Type = 'F498-R')


------ Fields #20 & #34 are used when Form_Type = 'F498-A' -------------------
20 C   Cand_NamL   200  Candidate's Last name
21 C   Cand_NamF    45  Candidate's First name
22 O   Cand_NamT    10  Candidate's Prefix or Title
23 O   Cand_NamS    10  Candidate's Suffix
24 C   Office_Cd     3  Office Sought  (See table of code in Overview)
25 C   Offic_Dscr   40  Office Sought Description  (Req. if Office_Cd=OTH)
26 C   Juris_Cd      3  Office Jurisdiction Code    Values:  STW=Statewide;
                                 SEN=Senate District; ASM=Assembly District;
                                 BOE=Board of Equalization District;
                                 CIT=City; CTY=County; LOC=Local; OTH=Other
27 C   Juris_Dscr   40  Off. Juris. Dscrip (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
```

Form 498 Late Independent Expenditures Made (continued)
==


```
  R{x}            Max
# C{x}  Field Name  Len  Description
-----  ----------  ---  -----------
28 C   Dist_No       3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
29 O   Off_S_H_Cd    1  Office Sought/Held Code:  H=Held; S=Sought
30 O   Bal_Name    200  Ballot Measure Name
31 O   Bal_Num       7  Ballot Number or Letter
32 O   Bal_Juris    40  Jurisdiction
33 C   Sup_Opp_Cd    1  Support/Oppose?  Values: S; O  (F401)

34 C   Amt_Attrib   12  Amount Attributed (only if Form_Type = 'F498-A')


35 O   Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
36 O   Memo_RefNo   20  Reference to text contained in a TEXT record.
```

```
******************************************************************************
 S e c t i o n   2   –   C a m p a i g n   S t a t e m e n t s
******************************************************************************

     400  Statement of Organization (Slate Mailer Organization)
     402  Statement of Termination (Slate Mailer Organization)
     410  Statement of Organization Recipient Committee


******************************************************************************
```

```
          Electronic File Components by Filing Type
          =========================================


RecType    FormName   Description
-------    --------   -------------------------------------------------
 HDR       CAL        "CAL" Header record
 CVR       F400       Cover Page; Stmt of Organization / Slate Mailer Org
 CVR2      F400       Cover Page; Additional Names & Addresses
 CVR3      F400       Cover Page; Part V; Verification Information



 HDR       CAL        "CAL" Header record
 CVR       F402       Cover Page; Stmt of Termination / Slate Mailer Org
 CVR3      F402       Cover Page; Verification Information



 HDR       CAL        "CAL" Header record
 CVR       F410       Cover Page; Stmt of Organization / Recipient Committee
 CVR2      F410       Cover Page; Additional Names & Addresses
 CVR3      F410       Cover Page; Part 3; Verification Information
```

```
 COVER PAGE RECORD LAYOUT FOR F400, F410 (STATEMENT OF ORGANIZATION)
                        F402 (STMT OF TERMINATION - SLATE MAILER)
 ======================================================================

   R{x}              Max
 # C{x}  Field Name  Len  Description
 -----  ----------  ---  -----------
 01 Rx   Rec_Type      3  Record Type Value: CVR

 02 Rx   Form_Type     4  Type of Filing/Form set - Values:  F400; F402; F410

 03 Rx   Filer_ID      9  Committee ID number of Filer

 04 R    Entity_Cd     3  Entity Code of the Filer
                          Values:  SMO - Slate Mailer Organization (F400,402)
                                   [COM|RCP] - Recipient Committee (F410)

 05 Rx   Filer_NamL  200  Cand. Last name or Cmtte/Org Name
 06 O    Filer_NamF   45  Candidate's First name
 07 O    Filer_NamT   10  Candidate's Prefix or Title
 08 O    Filer_NamS   10  Candidate's Suffix

 09 Rx   Report_Num    3  Report Number - Values: 000     - Original Report
                                                  001-999 - Amended Rpt #1-#999

 10 Rx   Rpt_Date      8  Date this report is filed

 11 C    Qual_CB       1  Qualified Committee check-box    (Req. if SMO)
 12 C    Qualfy_Dt     8  Date Qualified as committee      (Req. if Qual_CB=X)
 13 C    Term_Date     8  Termination Effective Date    (Req. if F402)

 14 R    Adr1         55  Street 1 of Filing Org/Cmtte/Candidate/Officeholder
 15 O    Adr2         55  Street 2 of Filing Org/Cmtte/Candidate/Officeholder
 16 R    City         30  City of Filing Org/Cmtte/Candidate/Officeholder
 17 R    ST            2  State of Filing Org/Cmtte/Candidate/Officeholder
 18 R    ZIP4         10  ZIP+4 of Filing Org/Cmtte/Candidate/Officeholder
 19 R    Phone        20  Phone of Filing Org/Cmtte/Candidate/Officeholder

 20 R    County_Res   20  County of Domicile, Residence, or where Located
 21 O    County_Act   20  County where Active  (F410)

 22 O    Mail_Adr1    55  Mailing Address of Filing Committee - Street 1
 23 O    Mail_Adr2    55  Mailing Address of Filing Committee - Street 2
 24 C    Mail_City    30  Mailing Address of Filing Committee - City
 25 C    Mail_ST       2  Mailing Address of Filing Committee - State
 26 C    Mail_ZIP4    10  Mailing Address of Filing Committee - ZIP+4

 27 O    Cmte_FAX     20  Optional Committee FAX number
 28 O    Cmte_Email   60  Optional Committee Email address

 29 R    Tres_NamL   200  Treasurer's Last name
 30 R    Tres_NamF    45  Treasurer's First name
 31 O    Tres_NamT    10  Treasurer's Prefix or Title
 32 O    Tres_NamS    10  Treasurer's Suffix
```

COVER PAGE LAYOUT FOR STATEMENT OF ORGANIZATION/TERMINATION   (Continued)
==

```
  R{x}              Max
# C{x}  Field Name  Len  Description
-----   ----------  ---  -----------
33 R    Tres_Adr1    55  Treasurer Street 1
34 O    Tres_Adr2    55  Treasurer Street 2
35 R    Tres_City    30  Treasurer City
36 R    Tres_ST       2  Treasurer State
37 R    Tres_ZIP4    10  Treasurer ZIP+4
38 R    Tres_Phon    20  Treasurer Phone
        Note: F400 Name/Addr info for Principal Officer(s) (POF) are coded
                on CVR2 records with the CVR2.Item_Cd='POF'.  Slate Mailer Auth
                Individuals (SMA) are coded on CVR2 records with Item_Cd='SMA'.
        Note: F410 Name/Addr info for Assistant Treasurer (ATR) and any
                other Principal Officer(s) (POF) are coded on CVR2 records
                with the CVR2.Item_Cd=['ATR'|'POF'].

39 C    Actvty_Lvl    2  Main level of Activity (Req. if SMO or GenPurp_CB=X)
                            Values:  CI = City; CO = County; ST = State


------ Fields 40 - 42 used on F400 Statement of Organization ---------------
40 C    Com82013YN    1  Is this SMO a 82013 "Committee"?  (Yes/No) (F400)
41 C    Com82013Nm  200  Name of 82013 Committee (F400; when Com82013YN=Y)
42 O    Com82013ID    9  ID of 82013 Committee (if Com82013Nm is a RCP cmtte)


------ Fields 43 - 58 used on F410 Statement of Organization ---------------
43 O    Control_CB    1  Controlled Committee Check-box
        Note: Name/Address info supplied on CVR2 record(s) with Item_Cd='CTL'.

44 O    Bank_Nam    200  Name of Financial Institution
45 C    Bank_Adr1    55  Street 1 of Financial Institution
46 O    Bank_Adr2    55  Street 2 of Financial Institution
47 C    Bank_City    30  City of Financial Institution
48 C    Bank_ST       2  State of Financial Institution
49 C    Bank_ZIP4    10  ZIP+4 of Financial Institution
50 C    Bank_Phon    20  Phone of Financial Institution
51 C    Bank_AcctNo  20  Bank Account Number
52 C    Acct_OpenDt   8  Date Account Opened
53 O    SurplusDsp   90  Disposition of Surplus Funds

54 O    PrimFC_CB     1  Primarily Formed Committee Check-box
        Note: Name/Address info supplied on CVR2 record(s) with Item_Cd='PFC'.

55 O    GenPurp_CB    1  General Purpose Committee Check-box
56 O    GPC_Descr   300  Brief description of Activity of GPC

57 O    Sponsor_CB    1  Sponsored Committee Check-box
        Note: Name/Address info supplied on CVR2 record(s) with Item_Cd='SPO'.

58 O    BrdBase_CB    1  Broad Based Committee Check-box
```

```
COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT
=========================================================

  R{x}            Max
# C{x}  Field Name Len  Description
-----  ---------- ---  -----------
01 Rx  Rec_Type      4  Record Type Value: CVR2

02 Rx  Form_Type     4  Form_Type (must equal Form_Type in CVR record)
                           Values:  F400; F410

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item


Note:  Remainder of CVR2 record is parsed depending on value of Form_Type.




------ Following variable fields used when Form_Type=[F400|F410] -------------

04 Rx  Entity_Cd     3  Values: ATR - Assistant Treasurer (F410)
                                POF - Principal Officer (F400, F410)
                                CAO - Candidate/Office-holder (F410)
                                PRO - Proponent (F410)
                                SPO - Sponsor (F410)
                                BNM - Ballot Measure's Name/Title (F410)
                                ATH - Authorizing Individual (F400)
                                COM - Committee (F400)
                                CTL - Controlled Committee (F410)
                                RCP - Recipient Committee (F400)

05 Rx  Enty_NamL   200  Filing Entity's Last name
06 C   Enty_NamF    45  Filing Entity's First name
07 O   Enty_NamT    10  Filing Entity's Prefix or Title
08 O   Enty_NamS    10  Filing Entity's Suffix

09 Rx  Item_Cd       3  Section of Stmt of Org this Itemization relates to
                        Values: ATR - Assistant Treasurer (F410)
                                POF - Principal {Filing} Officer (F400, F410)
                                CTL - Controlled Committee Itemization (F410)
                                PFC - Primarily Formed Committee Item (F410)
                                SPO - Sponsored Committee Itemization (F410)
                                SMA - Slate Mailer Authorizor (F400)

10 C   Mail_Adr1    55  Address                             (if Item_Cd = SPO)
11 O   Mail_Adr2    55  Optional 2nd line of Address
12 C   Mail_City    30  City                                (if Item_Cd = SPO)
13 C   Mail_ST       2  State code                          (if Item_Cd = SPO)
14 C   Mail_ZIP4    10  Zip+4                               (if Item_Cd = SPO)
15 O   Day_Phone    20  Daytime Phone Number
16 O   FAX_Phone    20  FAX Phone Number
17 O   Email_Adr    60  Email Address  {does not map to present FPPC forms}
```

COVER PAGE - {{2} ADDITIONAL NAMES/COMMITTEES SECTION} RECORD LAYOUT (Cont.)
==


```
  R{x}            Max
# C{x}  Field Name Len  Description
-----  ----------  ---  -----------

18 C    Cmte_ID       9  Committee ID  (If Entity_Cd=RCP)

19 C    Ind_Group    90  Industry Group / Affiliation   (if Item_Cd = SPO)

20 C    POF_Title    45  Position/Title of Prin Officer (if Item_Cd = POF)



------ Fields #21 - #32 used when Item_Cd=[CTL|PFC]

------ Note:  On F410; when Item_Cd='PFC':  EITHER Candidate OR Ballot Measure
------ information is "conditionally required", BUT not both at the same time.

21 C    Office_Cd     3  Office Sought  (See table of code in Overview)
22 C    Offic_Dscr   40  Office Sought Description  (Req. if Office_Cd=OTH)
23 C    Juris_Cd      3  Office Jurisdiction Code    Values:  STW=Statewide;
                            SEN=Senate District; ASM=Assembly District;
                            BOE=Board of Equalization District;
                            CIT=City; CTY=County; LOC=Local; OTH=Other
24 C    Juris_Dscr   40  Off. Juris. Dscrip (Req. if Juris_Cd=[CIT|CTY|LOC|OTH]
25 C    Dist_No       3  Office District Number (Req. if Juris_Cd=[SEN|ASM|BOE]
26 O    Off_S_H_Cd    1  Office Sought/Held Code:  H=Held; S=Sought
27 C    Non_Pty_CB    1  Non-Partisan check-box        (only if Item_Cd = CTL)
28 C    Party_Name  200  Name of Party (if partisan)   (only if Item_Cd = CTL)
29 C    Bal_Num       7  Ballot Number or Letter       (only if Item_Cd = PFC)
30 C    Bal_Juris    40  Ballot Measure Jurisdiction   (only if Item_Cd = PFC)
31 C    Sup_Opp_Cd    1  Support/Oppose?  Values: S; O  (only if Item_Cd = PFC)

32 C    Year_Elect    4  Year of Election (format ccyy) (only if Item_Cd = CTL)
```

COVER PAGE (PART III; VERIFICATION INFO) RECORD LAYOUT
==


```
  R{x}              Max
# C{x} Field Name   Len  Description
----- ----------   ---  -----------
01 Rx  Rec_Type      4  Record Type Value: CVR3

02 Rx  Form_Type     4  Form_Type (must equal Form_Type in CVR record)
                           Values:  F400; F402; F410

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item
```


  Note: Remainder of CVR3 record is parsed depending on value of Form_Type.
          Refer to Section I description of the CVR3 record for the description
          of field parsing rules for Campaign Statements F400, F402, F410.

```
****************************************************************************
 S e c t i o n   3   -   L o b b y i s t   D i s c l o s u r e   R e p o r t s
****************************************************************************
```

```
    615     Lobbyist Report
    625     Report of Lobbying Firm
    630*    Payments Made to Lobbying Coalitions (Attachment to Form 625 or 635)
    635     Report of Lobbyist Employer or Report of Lobbying Coalition
    635-C*  Payments Received by Lobbying Coalitions
    640*    Governmental Agencies Reporting (Attachment to Form 635 or Form 645)
    645     Report of Person Spending $5,000 or More
    690*    Amendment to Lobbying Disclosure Report
```

```
* The 630, 635-C, 640, and 690 forms are not filed as standalone forms,
  but instead are included within the 615, 625, 635, and 645 filings.
```

```
****************************************************************************
```

```
        Electronic File Components by Filing Type
        =========================================
```

RecType	FormName	Description
HDR	CAL	"CAL" Header record
CVR	F615	Cover Page; Lobbyist Report
F690	F615	Amendment Information sheet (a.k.a. Form 690)
LEXP	F615P1	Part I - Activity Expenses
LCCM	F615P2	Part II - Campaign Contributions Made [or Delivered]
HDR	CAL	"CAL" Header record
CVR	F625	Cover Page; Recipient Committee
CVR2	F625	Cover Page; Part II; Partners, Owners, Officers, ...
F690	F625	Amendment Information sheet (a.k.a. Form 690)
SMRY	F625...	Summary Page & Misc. Schedule Line-item [sub]totals
LPAY	F625P2	Payments Received in Connection with Lobbying Activity
LEXP	F625P3A	Part III/Sec A - Activity Expenses
LOTH	F625P3B	Part III/Sec B - Payments to OTHER Lobbying Firms
LCCM	F625P4B	Part IV/Sec B - Campaign Contributions Made
LATT	S630	Attachment Form 630 - Payments Made to Lobbying Coalitions

```
 RecType    FormName    Description
 -------    --------    -------------------------------------------------------
  HDR       CAL         "CAL" Header record
  CVR       F635        Cover Page; Candidate Committee
  CVR2      F635        Cover Page; Part II; Partners, Owners, Officers, ...
  F690      F635        Amendment Information sheet (a.k.a. Form 690)
  SMRY      F635...     Summary Page & Misc. Schedule Line-item [sub]totals
  LPAY      F635P3B     Part III/Sec B - Payments to Lobbying Firms
  LEXP      F635P3C     Part III/Sec C - Activity Expenses
  LCCM      F635P4B     Part IV/SecB - Campaign Contributions Made
  LATT      S630        Attach Form 630 - Payments Made to Lobbying Coalitions
  LATT      S635-C      Attach Form 635-C - Payments Rcvd by Lobbying Coalitions
  LATT      S640        Attach Form 640 - Other Payments to Influence ...



  HDR       CAL         "CAL" Header record
  CVR       F645        Cover Page; Recipient Committee
  F690      F645        Amendment Information sheet (a.k.a. Form 690)
  SMRY      F645...     Summary Page & Misc. Schedule Line-item [sub]totals
  LEXP      F645P2A     Part II/Sec A - Activity Expenses
  LCCM      F645P3B     Part III/SecB - Campaign Contributions Made
  LATT      S630        Attach Form 630 - Payments Made to Lobbying Coalitions
  LATT      S640        Attach Form 640 - Other Payments to Influence ...
```

```
 COVER PAGE RECORD LAYOUT FOR F615,625,635,645 LOBBYIST DISCLOSURE REPORTS
 =========================================================================

   R{x}          Max
 # C{x}  Field Name  Len  Description
 -----  ----------  ---  -----------
 01 Rx  Rec_Type      3  Record Type Value: CVR
 02 Rx  Form_Type     4  Type of Filing or Form set.
                         Values:  F615; F625; F635; F645

 03 Rx  Sender_ID     9  ID# of Lobbyist Entity that is SUBMITTING this report.

                         (Note:  This is the ID# assigned by the SOS after the
                         Lobbyist Entity first registers.  Typically, it is the
                         same as the Filer_ID except when a Firm is submitting
                         a report on bahalf of another Lobbyist Entity.)

 04 Rx  Filer_ID      9  ID# of Lobbyist Entity that is SUBJECT of this report.

                         (Note:  In the case of F615 & F635 reports, the Sender
                         and Filer ID# are not necessarily the same.  However,
                         they must always be equal on F625 and 645 reports.)
                         (Note: The contents of this record (Name/Address/etc.)
                         belong to the Lobbying Entity of the Filer_ID, NOT the
                         Lobbying Entity of the Sender_ID.)

 05 R   Entity_Cd     3  Entity Code of the Filer
                         Values: LBY - Lobbyist (a person) (F615, F645)
                                 FRM - Lobbying Firm        (F625, F645)
                                 LEM - Lobbying Employer   (F635, F645)
                                 LCO - Lobbying Coalition  (F635, F645)
                                 IND - Person (spending > $5000) (F645)
                                 OTH - Other                (F645)

 06 Rx  Filer_NamL  200  Name of Lobbyist, Firm, Employer, Coalition or
                         Major Donor that is filing report
 07 C   Filer_NamF   45  Lobbyist Entity First name
 08 O   Filer_NamT   10  Lobbyist Entity Prefix or Title
 09 O   Filer_NamS   10  Lobbyist Entity Suffix

 10 Rx  Report_Num    3  Report Number - Values: 000     - Original Report
                                                 001-999 - Amended Rpt #1-#999

 11 Rx  Rpt_Date      8  Date this report is filed
 12 R   From_Date     8  Reporting Period From Date
 13 R   Thru_Date     8  Reporting Period To/Through Date
 14 C   Cum_Beg_Dt    8  Cumulative Period Beginning Date (Req on F625,635,645)

 15 C   Firm_ID       9  ID# of Firm/Employer/Coalition   (Req on F615)

                         (This is the ID# of the Firm/Employer/Coalition the
                          Lobbyist works for - if Lobbyist not self-employed).
```

```
COVER PAGE RECORD LAYOUT FOR F615,625,635,645  (Continued)
=========================================================

  R{x}            Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------

16 C   Firm_Name  200  Name of Firm/Employer/Coalition  (Req on F615)

                       (This is the Name of the Firm/Employer/Coalition the
                        Lobbyist works for - if Lobbyist not self-employed).

                       (Firm_Name is mapped to print rendering of the 690 form
                        only for amended F615 reports when Entity_Cd = 'LBY'.)

17 R   Firm_Adr1   55  Street 1 of Firm/Employer/Coalition or Business
18 O   Firm_Adr2   55  Street 2 of Firm/Employer/Coalition or Business
19 R   Firm_City   30  City of Firm/Employer/Coalition or Business
20 R   Firm_ST      2  State of Firm/Employer/Coalition or Business
21 R   Firm_ZIP4   10  ZIP+4 of Firm/Employer/Coalition or Business
22 R   Firm_Phon   20  Phone of Firm/Employer/Coalition or Business


------ Mailing Address fields only apply to F615 and F625 filings.

23 O   Mail_Adr1   55  Mail Address of Firm/Employer/Coalition - Street 1
24 O   Mail_Adr2   55  Mail Address of Firm/Employer/Coalition - Street 2
25 C   Mail_City   30  Mail Address of Firm/Employer/Coalition - City
26 C   Mail_ST      2  Mail Address of Firm/Employer/Coalition - State
27 C   Mail_ZIP4   10  Mail Address of Firm/Employer/Coalition - ZIP+4
28 O   Mail_Phon   20  Mail Address of Firm/Employer/Coalition - Phone
                       (Note:  This field does not appear on any forms, use
                       for a second, alternate phone number is optional.)


------ Note:  Fields 29-39 are also mapped to the print rendering of the F690

29 R   Sig_Date     8  Date when signed
30 R   Sig_Loc     45  City and State where signed

31 R   Sig_NamL   200  Signer "as signed" Last name
32 R   Sig_NamF    45  Signer "as signed" First name
33 O   Sig_NamT    10  Signer "as signed" Prefix or Title
34 O   Sig_NamS    10  Signer "as signed" Suffix

35 R   Prn_NamL   200  Signer "as typed/printed" Last name  (F625,F635,F645)
36 R   Prn_NamF    45  Signer "as typed/printed" First name (F625,F635,F645)
37 O   Prn_NamT    10  Signer "as typed/printed" Prefix or Title
38 O   Prn_NamS    10  Signer "as typed/printed" Suffix

39 C   Sig_Title   45  Title of Signer                      (F625,F635,F645)
```

COVER PAGE RECORD LAYOUT FOR F615,625,635,645 (Continued)
==


```
   R{x}             Max
# C{x} Field Name  Len  Description
----- ----------  ---  -----------



------ Variable F615 fields follow when Form_Type=F615 ---------------------

40 O   NoPart1_CB    1  "No Part I information" check-box
41 O   NoPart2_CB    1  "No Part II information" check-box



------ Variable F625 fields follow when Form_Type=F625 ---------------------

40 O   Part1_1_CB    1  "Partners, Owners, ... Form 615 attached" check-box
41 O   Part1_2_CB    1  "Partners, Owners, ... Listed below" check-box
42 O   Ctrib_N_CB    1  "No Campaign Contributions Made" check-box
43 O   Ctrib_Y_CB    1  "Part IV completed and Attached" check-box
44 O   Lobby_N_CB    1  "Lobby Coalition - None" check-box
45 O   Lobby_Y_CB    1  "Lobby Coalition - F630 attached" check-box


------ If applicable, give Major Donor Name or Recipient Committee & ID
46 C   Major_NamL  200  Major Donor Last Name (Part IV; Section A)
47 C   Major_NamF   45  Major Donor First Name(s)
48 O   Major_NamT   10  Major Donor Prefix or Title
49 O   Major_NamS   10  Major Donor Suffix

50 C   RcpCmte_Nm  200  Recipient Committee Name (Part IV; Section A)
51 C   RcpCmte_ID    9  Recipient Cmtte (or Major Donor) ID#  (Part IV; Sec A)



------ Variable F635 fields follow when Form_Type=F635 ----------------------

40 O   Ctrib_N_CB    1  "No Campaign Contributions Made" check-box
41 O   Ctrib_Y_CB    1  "Part IV completed and Attached" check-box

42 R   Lby_Actvty  400  Description of Lobbying Activity -- Refer to Overview
                        for instructions on coding this field.

------ If applicable, give Major Donor Name or Recipient Committee & ID
43 C   Major_NamL  200  Major Donor Last Name (Part IV; Section A)
44 C   Major_NamF   45  Major Donor First Name(s)
45 O   Major_NamT   10  Major Donor Prefix or Title
46 O   Major_NamS   10  Major Donor Suffix

47 C   RcpCmte_Nm  200  Recipient Committee Name (Part IV; Section A)
48 C   RcpCmte_ID    9  Recipient Cmtte (or Major Donor) ID#  (Part IV; Sec A)
```

```
  COVER PAGE RECORD LAYOUT FOR F615,625,635,645  (Continued)
  ========================================================


    R{x}              Max
  # C{x} Field Name   Len  Description
  ----- ----------   ---  -----------


  ------ Variable F645 fields follow when Form_Type=F645 ----------------------

  40 O   Ctrib_N_CB    1  "No Campaign Contributions Made" check-box
  41 O   Ctrib_Y_CB    1  "Part III completed and Attached" check-box

  42 R   Lby_Actvty  400  Description of Lobbying Activity -- Refer to Overview
                          for instructions on coding this field.


  ------ If applicable, give Major Donor Name or Recipient Committee & ID
  43 C   Major_NamL  200  Major Donor Last Name (Part III; Section A)
  44 C   Major_NamF   45  Major Donor First Name(s)
  45 O   Major_NamT   10  Major Donor Prefix or Title
  46 O   Major_NamS   10  Major Donor Suffix

  47 C   RcpCmte_Nm  200  Recipient Committee Name (Part III; Section A)
  48 C   RcpCmte_ID    9  Recipient Cmtte (or Major Donor) ID#  (Part IV; Sec A)


  Note:  F625 Part I and F635 Part II Name & Title information for Partners,
  Owners, Officers and Employees (PTN,OWN,OFF,EMP) is coded on CVR2 records
  with CVR2.Entity_Cd = [PTN|OWN|OFF|EMP].
```

COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT
===


```
  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: CVR2

02 Rx  Form_Type    4  Form_Type (must equal Form_Type in CVR record)
                         Values:  F625; F635

03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item



Note:  Remainder of CVR2 record is parsed depending on value of Form_Type.



------ Following variable fields used when Form_Type=[F625|F635] -------------


  R{x}           Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------

04 Rx  Entity_Cd    3  Values: PTN - Partner
                               OWN - Owner
                               OFF - Officer
                               EMP - Employee

05 C   Entity_ID    9  ID# of Entity (Partner, Owner, Officer, Employee)
                         if that entity is required to file Form 615.
                         (Note:  Required on F625 when CVR.40.Part_1_1='X')

06 R   Enty_NamL  200  Partner, Owner, Officer, Employee Last name
07 R   Enty_NamF   45  Partner, Owner, Officer, Employee First name
08 O   Enty_NamT   10  Partner, Owner, Officer, Employee Prefix or Title
09 O   Enty_NamS   10  Partner, Owner, Officer, Employee Suffix
10 C   Enty_Title  45  Title of Entity Named above (Req. on F635 only)
```

```
AMENDMENT INFORMATION (a.k.a.. Form 690; Part II)
=================================================

   R{x}           Max
 # C{x}  Field Name   Len  Description
 -----  ----------  ---  -----------
 01 Rx   Rec_Type      4  Record Type Value: F690

 02 Rx   Form_Type     4  Form_Type (must equal Form_Type in CVR record)
                          Values:  F615; F625; F635; F645

 03 Rx   Exec_Date     8  Date the original report (or prior amendment
                          to the original report) was executed on

 04 Rx   From_Date     8  Report Period From Date of Original Report

 05 Rx   Thru_Date     8  Report Period To/Through Date of Original Report

 06 O    Chg_Parts   100  Amended info affects items on Part(s)

 07 O    Chg_Sects   100  Amended info affects items on Section(s)

 08 Rx   Amend_Txt1  330  Description of changes
                          (6 lines of 55 char 9pt text)
```

SUMMARY TOTALS RECORD LAYOUT
===========================


```
  R{x}             Max
# C{x} Field Name  Len  Description
----- ---------- --- -----------
01 Rx  Rec_Type     4  Record Type Value: SMRY
02 Rx  Form_Type    8  Name of Filing Form or Schedule Name
03 Rx  Line_Item    8  Line Number of Summary Total
04 o   Amount_A    12  Summary Amount (Amount this Period)
```


Note: Amount(s) may have a null or zero value if there is no dollar
       total to be conveyed. SMRY records with null/zero Amount(s) do
       not have to be coded within a filing. Amount(s) are assumed to
       be zero in the absence of a SMRY record.

Examples:
=========

F615 Lobbyist Report does not have any summary (SMRY) totals.

F625 SMRY records (when needed) are coded with these Form_Type/Line# values:


```
SMRY line
===================
SMRY,F625,A,Amt_A
SMRY,F625,B,Amt_A
SMRY,F625,C,Amt_A
SMRY,F625,D,Amt_A

SMRY,F625P2,0,Amt_A     {no Part 2 line-item# on form, code Line_Item=0 (zero)}
SMRY,F625P3A,1,Amt_A
SMRY,F625P3A,2,Amt_A
SMRY,F625P3A,3,Amt_A
SMRY,F625P3B,0,Amt_A    {no Part 3b line-item# on form, code Line_Item=0 (zero)}
```

F635(including F640) SMRY records are coded with these Form_Type/Line# values:


```
SMRY line
====================
SMRY,F635,A,Amt_A
SMRY,F635,B,Amt_A
SMRY,F635,C,Amt_A
SMRY,F635,D,Amt_A
SMRY,F635,ABCD,Amt_A
SMRY,F635,E,Amt_A

SMRY,F635P3A,1,Amt_A
SMRY,F635P3A,2,Amt_A
SMRY,F635P3B,0,Amt_A   {no Part 3b line-item# on form, code Line_Item=0 (zero)}
SMRY,F635P3C,0,Amt_A   {no Part 3c line-item# on form, code Line_Item=0 (zero)}
SMRY,F635P3D,1,Amt_A
SMRY,F635P3D,2,Amt_A
SMRY,F635P3D,3,Amt_A
SMRY,F635P3E,0,Amt_A   {no Part 3e line-item# on form, code Line_Item=0 (zero)}

SMRY,S640,1,Amt_A
SMRY,S640,2,Amt_A
SMRY,S640,3,Amt_A
SMRY,S640,4,Amt_A
SMRY,S640,5,Amt_A
```


F645(including F640) SMRY records are coded with these Form_Type/Line# values:


```
SMRY line
===================
SMRY,F645,A,Amt_A
SMRY,F645,B,Amt_A
SMRY,F645,AB,Amt_A
SMRY,F645,C,Amt_A

SMRY,F645P2A,0,Amt_A  {no Part 2a line-item# on form, code Line_Item=0 (zero)}
SMRY,F645P2B,1,Amt_A
SMRY,F645P2B,2,Amt_A
SMRY,F645P2B,3,Amt_A
SMRY,F645P2C,0,Amt_A  {no Part 2c line-item# on form, code Line_Item=0 (zero)}

SMRY,S640,1,Amt_A
SMRY,S640,2,Amt_A
SMRY,S640,3,Amt_A
SMRY,S640,4,Amt_A
SMRY,S640,5,Amt_A
```

ACTIVITY EXPENDITURE SCHEDULES: (F615P1; F625P3A; F635P3C; F645P2A)
==

```
  R{x}            Max
# C{x} Field Name  Len  Description
----- ----------  ---  -----------
01 Rx  Rec_Type      4  Record Type Value: LEXP

02 Rx  Form_Type     7  Schedule Name/ID  Values:
                          F615P1 = F615/Part 1 - Activity Expenses
                          F625P3A = F625/Part 3A - Activity Expenses
                          F635P3C = F635/Part 3C - Activity Expenses
                          F645P2A = F645/Part 2A - Activity Expenses

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item

04 R   RecSubType    1  1 = Main Item Entry (Date and Amount are required)
                        2 = Subsequent detail of additional Beneficiary info

05 R   Entity_Cd     3  Entity Code of the Payee
                        Values:  IND - Individual;
                                 OTH - Other (e.g. a Business, Org, ...)

06 R   Payee_NamL  200  Payee's Last name
07 C   Payee_NamF   45  Payee's First name  (Req if 'IND')
08 O   Payee_NamT   10  Payee's Prefix or Title
09 O   Payee_NamS   10  Payee's Suffix
10 R   Payee_Adr1   55  Address of Payee
11 O   Payee_Adr2   55  Optional 2nd line of Address
12 R   Payee_City   30  City
13 R   Payee_ST      2  State code
14 R   Payee_ZIP4   10  Zip+4

15 O   CredCardCo  200  Name of Credit Card Company (if paid by Credit Card)

16 R   Bene_Name    90  Name of Reportable Person Benefiting
17 R   Bene_Posit   90  Official Position of Person Benefiting
18 R   Bene_Amt     12  Amount Benefiting Beneficiary
19 R   Expn_Dscr    90  Description of Consideration

20 C   Date          8  Date of Expenditure  (Only when RecSubType=1)
21 C   Amount       12  Amount of Payment    (Only when RecSubType=1)

22 O   Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
23 O   Memo_RefNo   20  Reference to text contained in a TEXT record.

24 O   BakRef_TID   20  Back Reference to a Tran_ID of a "parent" record
```

PAYMENTS MADE/RECEIVED TO/FROM LOBBYING FIRMS SCHEDULES: (F625P2; F635P3B)
==

```
  R{x}            Max
# C{x}  Field Name Len  Description
-----  ----------  ---  -----------
01 Rx  Rec_Type      4  Record Type Value: LPAY

02 Rx  Form_Type     7  Schedule Name/ID  Value:
                          F625P2 = F625/Part 2 - Paymts Rcvd for Lobby Activity
                          F635P3B = F635/Part 3B - Payments to Lobbying Firms

03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item

04 R   Entity_Cd     3  Entity Code of the Employer
                        Values:  FRM - Lobbying Firm
                                 LEM - Lobbying Employer
                                 LCO - Lobbying Coalition

05 R   Emplr_NamL  200  Name of Firm, Employer, Coalition
06 O   Emplr_NamF   45  Employer First name       (never a person / not used)
07 O   Emplr_NamT   10  Employer Prefix or Title  (never a person / not used)
08 O   Emplr_NamS   10  Employer Suffix           (never a person / not used)

09 R   Emplr_Adr1   55  Address of Firm, Employer, Coalition
10 O   Emplr_Adr2   55  Optional 2nd line of Address
11 R   Emplr_City   30  City
12 R   Emplr_ST      2  State code
13 R   Emplr_ZIP4   10  Zip+4
14 C   Emplr_Phon   20  Phone Number (Req if F625/Part2 (if Form_Type=F625P2))

15 C   Lby_Actvty  200  Description of Lobbying Activity  (Req only on F625P2)
                        See Overview for instructions on coding this field.


------ Any one out of the following 3 Amounts are required ------

16 C   Fees_Amt     12  Fees and Retainers Amount
17 C   Reimb_Amt    12  Reimbursements of Expenses Amount
18 C   Advan_Amt    12  Advance & Other Payments Amount


19 C   Advan_Dscr  100  Description of Advance and Other Payments
                        (Required if Advan_Amt is non-zero)

20 R   Per_Total    12  Total this {reporting} Period
21 R   Cum_Total    12  Cumulative Total to Date

22 O   Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
23 O   Memo_RefNo   20  Reference to text contained in a TEXT record.

24 O   BakRef_TID   20  Back Reference to a Tran_ID of a "parent" record
```

PAYMENT TO OTHER LOBBYING FIRMS: (F625P3B)
==


```
  R{x}              Max
# C{x}  Field Name  Len  Description
-----   ----------  ---  -----------
01 Rx   Rec_Type      4  Record Type Value: LOTH

02 Rx   Form_Type     7  Schedule Name/ID  Values:
                           F625P3B = F625/Part 3B – Paymts to OTHER Lobby Firms

03 Rx   Tran_ID      20  Transaction ID - permanent value unique to this item

04 R    Firm_Name   200  Name of Firm
05 R    Firm_Adr1    55  Address of Firm
06 O    Firm_Adr2    55  Optional 2nd line of Address
07 R    Firm_City    30  City
08 R    Firm_ST       2  State code
09 R    Firm_ZIP4    10  Zip+4
10 R    Firm_Phon    20  Phone Number

11 R    Subj_NamL   200  Last Name of Employer/Client subject of lobbying
12 O    Subj_NamF    45  First Name of Employer/Client subject of lobbying
13 O    Subj_NamT    10  Prefix/Title of Employer/Client subject of lobbying
14 O    Subj_NamS    10  Suffix of Employer/Client subject of lobbying

15 O    Date          8  Date of Payment     (Does not show on form)
16 R    Amount       12  Amount of Payment
17 R    Cum_Amt      12  Cumulative Total to Date

18 O    Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
19 O    Memo_RefNo   20  Reference to text contained in a TEXT record.
```

CAMPAIGN CONTRIBUTIONS SCHEDULES: (F615P2; F625P4B; F635P4B; F645P3B)
===

```
  R{x}          Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------
01 Rx  Rec_Type     4  Record Type Value: LCCM

02 Rx  Form_Type    7  Schedule Name/ID
                       Values:  F615P2 = F615/Part 2 - Campaign Contrib
                                F625P4B = F625/Part 4B - Campaign Contrib
                                F635P4B = F635/Part 4B - Campaign Contrib
                                F645P3B = F645/Part 3B - Campaign Contrib

03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item

04 R   Entity_Cd    3  Entity Code for Recipient of the Campaign Contribution
                       Value:   COM - (Recipient) Committee

05 R   Recip_NamL 200  Name of Recipient of Campaign Contribution
06 O   Recip_NamF  45  Recipient's First name
07 O   Recip_NamT  10  Recipient's Prefix or Title
08 O   Recip_NamS  10  Recipient's Suffix

------ These Address fields do not appear on any forms, they are optional
09 O   Recip_Adr1  55  Address of Recipient
10 O   Recip_Adr2  55  Optional 2nd line of Address
11 O   Recip_City  30  City
12 O   Recip_ST     2  State code
13 O   Recip_ZIP4  10  Zip+4


14 R   Recip_ID     9  ID# of Recipient

------ Contributor Name and Separate Account only apply to F615 filings
15 C   Ctrib_NamL 200  Contributor's Last name (If other than Lobbyist)
16 O   Ctrib_NamF  45  Contributor's First name
17 O   Ctrib_NamT  10  Contributor's Prefix or Title
18 O   Ctrib_NamS  10  Contributor's Suffix
19 C   Acct_Name   90  Name of Separate Account (If applicable)


20 C   Date         8  Date of Contribution
21 C   Amount      12  Amount of Contribution

22 O   Memo_Code    1  Memo Amount?  (Date/Amount are informational only)
23 O   Memo_RefNo  20  Reference to text contained in a TEXT record.

24 O   BakRef_TID  20  Back Reference to a Tran_ID of a "parent" record
```

ATTACHMENT SCHEDULES FOR PAYMENTS: (S630; S635-C; S640)
==


```
   R{x}          Max
 # C{x} Field Name  Len  Description
 -----  ----------  ---  -----------
 01 Rx  Rec_Type      4  Record Type Value: LATT

 02 Rx  Form_Type     6  Schedule Name/ID
                         Values:  S630 = Payments Made to Lobbying Coalitions
                                  S635-C = Payments Rcvd by Lobbying Coalitions
                                  S640 = Other Payments to Influence ...

 03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item

 04 R   Entity_Cd     3  Entity Code of the Payment Recipient/Payee
                         Values: FRM - Lobbying Firm;        (S635-C|S640)
                                 LEM - Lobbying Employer;    (S635-C|S640)
                                 LCO - Lobbying Coalition;   (S630|S635-C)
                                 LBY - Lobbyist (a person);  (S635-C)
                                 IND - Individual;           (S635-C|S640)
                                 OTH - Other (Bus,Org,etc.)  (S635-C|S640)

 05 R   Recip_NamL  200  Recipient/Payee's Last name
 06 C   Recip_NamF   45  Recipient/Payee's First name  (Req if 'LBY' or 'IND')
 07 O   Recip_NamT   10  Recipient/Payee's Prefix or Title
 08 O   Recip_NamS   10  Recipient/Payee's Suffix

 09 R   Recip_Adr1   55  Address of Recipient/Payee
 10 O   Recip_Adr2   55  Optional 2nd line of Address
 11 R   Recip_City   30  City
 12 R   Recip_ST      2  State code
 13 R   Recip_ZIP4   10  Zip+4

 14 O   Date          8  Date of Payment      (Does not show on form)
 15 R   Amount       12  Amount of Payment
 16 R   Cum_Amt      12  Cumulative Total to Date

 17 O   CumBeg_Dt     8  Cumulative Period Begin Date  (This field is not used)

 18 O   Memo_Code     1  Memo Amount?  (Date/Amount are informational only)
 19 O   Memo_RefNo   20  Reference to text contained in a TEXT record.
```

```
*****************************************************************************
  S e c t i o n   4   –   L o b b y i s t   S t a t e m e n t s
*****************************************************************************

  601    Lobbying Firm Registration Statement
  602    Lobbying Firm Activity Authorization
  603    Lobbyist Employer or Lobbying Coalition Registration Statement
  604    Lobbyist Certification Statement
  605*   Amendment to Registration, Lobbying Firm, Lobbyist Employer,
           Lobbying Coalition
  606    Notice of Termination
  607    Notice of Withdrawal

       * The 605 is not filed as a stand-alone filing.  Instead
         it is included within the 601 and 603 Registration filings.


*****************************************************************************



            Electronic File Components by Filing Type
            ==========================================



RecType    FormName    Description
-------    --------    ----------------------------------------------------
  HDR       CAL        "CAL" Header record
  CVR       F601       Cover Page; Lobbying Firm Registration Statement
  CVR2      F601       Cover Page; Part I Individual Lobbyists
  F605      F601       Amendment Information sheet (a.k.a. Form 605)
  LEMP      F601P2A    Part II/Sec A - Lobbyist Employers
  LEMP      F601P2B    Part II/Sec B - Subcontracted Clients



  HDR       CAL        "CAL" Header record
  CVR       F602       Cover Page; Lobbying Firm Activity Authorization
  CVR2      F602       Cover Page; side 1: Names of Subcontracted Clients
                                   side 2: Names "50 or less" Assoc members
```

```
 RecType    FormName   Description
 -------    --------   ------------------------------------------------
  HDR       CAL        "CAL" Header record
  CVR       F603       Cover Page; Lobbyist Employer/Coalition Regis Stmt
  CVR2      F603       Cover Page; Names of Employees, Firms & Agencies
  F605      F603       Amendment Information sheet (a.k.a. Form 605)



  HDR       CAL        "CAL" Header record
  CVR       F604       Cover Page; Lobbyist Certification Statement



  HDR       CAL        "CAL" Header record
  CVR       F606       Cover Page; Notice of Termination



  HDR       CAL        "CAL" Header record
  CVR       F607       Cover Page; Notice of Withdrawal
```

```
 COVER PAGE RECORD LAYOUT FOR:  F601; F602; F603; F604; F606; F607
 ================================================================

   R{x}           Max
 # C{x}  Field Name  Len  Description
 -----  ----------  ---  -----------
 01 Rx   Rec_Type     4   Record Type Value: CVR

 02 Rx   Form_Type    4   Type of Filing or Form set.
                          Values:  F601; F602; F603; F604; F606; F607

 03 Rx   Sender_ID    9   ID# of Lobbyist Entity that is SUBMITTING this report.

                          (Note:  This is the ID# assigned by the SOS after the
                          Lobbyist Entity first registers.  Typically, it is the
                          same as the Filer_ID except when a Firm is submitting
                          a report on bahalf of another Lobbyist Entity.)

 04 Rx   Filer_ID     9   ID# of Lobbyist Entity that is SUBJECT of this report.

                          (Note:  Sender and Filer ID# are not necessarily the
                          same on F602, F604, F606 & F607 filings.  However,
                          they must always be equal on F601 and 603 reports.)

                          (Note: The contents of this record (Name/Address/etc.)
                          belong to the Lobbying Entity of the Filer_ID, NOT the
                          Lobbying Entity of the Sender_ID.)

 05 R    Entity_Cd    3   Entity Code of the Filer
                          Values:  LBY - Lobbyist Person    (F601,604,606,607)
                                   FRM - Lobbying Firm      (F601,602,603,606)
                                   LEM - Lobbying Employer  (F601,602,603,606)
                                   LCO - Lobbying Coalition (F601,602,603,606)

 06 Rx   Filer_NamL 200   Lobbying Entity Name (or Lobbyist Person's Last Name)
 07 C    Filer_NamF  45   Lobbyist's First name  (Req only if 'LBY')
 08 O    Filer_NamT  10   Lobbyist's Prefix or Title
 09 O    Filer_NamS  10   Lobbyist's Suffix

 10 Rx   Report_Num   3   Report Number - Values: 000    - Original Report
                                                  001-999 - Amended Rpt #1-#999

 11 Rx   Rpt_Date     8   Date this report is filed

 12 R    LS_Beg_Yr    4   Legislative Session Beginning Year
 13 R    LS_End_Yr    4   Legislative Session Ending Year

 14 O    Qual_Date    8   Date Qualified (when this is an initial registration)
                          (this date applies to F601, F603 and F604 forms)

 15 C    Eff_Date     8   Effective Date of Auth/Term (Req. if F602,F606,F607)
```

```
 COVER PAGE RECORD LAYOUT FOR:  F601; F602; ...; F607  (Continued)
 ================================================================

   R{x}            Max
 # C{x} Field Name Len  Description
 ----- ---------- ---  -----------
 16 R   Bus_Adr1    55  Business Address of Filer - Street 1
 17 O   Bus_Adr2    55  Business Address of Filer - Street 2
 18 R   Bus_City    30  Business Address of Filer - City
 19 R   Bus_ST       2  Business Address of Filer - State
 20 R   Bus_ZIP4    10  Business Address of Filer - ZIP+4
 21 R   Bus_Phon    20  Phone number
 22 O   Bus_FAX     20  Optional FAX number
 23 O   Bus_Email   60  Optional Email address

 24 O   Mail_Adr1   55  Mail Address of Filer (if different) - Street 1
 25 O   Mail_Adr2   55  Mail Address of Filer (if different) - Street 2
 26 C   Mail_City   30  Mail Address of Filer (if different) - City
 27 C   Mail_ST      2  Mail Address of Filer (if different) - State
 28 C   Mail_ZIP4   10  Mail Address of Filer (if different) - ZIP+4
 29 O   Mail_Phon   20  Mail Address of Filer (if different) - Phone

 30 R   Sig_Date     8  Date when signed
 31 O   Sig_Loc     45  City and State where signed  (does not appear on forms)

 32 R   Sig_NamL   200  Signer "as signed" Last name
 33 R   Sig_NamF    45  Signer "as signed" First name
 34 O   Sig_NamT    10  Signer "as signed" Prefix or Title
 35 O   Sig_NamS    10  Signer "as signed" Suffix

 36 C   Prn_NamL   200  Signer "as typed/printed" Last name   (not on F604)
 37 C   Prn_NamF    45  Signer "as typed/printed" First name (not on F604)
 38 O   Prn_NamT    10  Signer "as typed/printed" Prefix or Title
 39 O   Prn_NamS    10  Signer "as typed/printed" Suffix

 40 C   Sig_Title   45  Title of Signer                       (not on F604)



 ------ Variable F601 field follows when Form_Type=F601 -----------------------

 41 R   Stmt_Firm   90  Lobby Firm Name in "Statement of Responsible Officer"
```

```
 COVER PAGE RECORD LAYOUT FOR:  F601; F602; ...; F607  (Continued)
 ================================================================

   R{x}                 Max
 # C{x} Field Name  Len  Description
 -----  ----------  ---  -----------

 ------ Variable F602/F603 fields follow when Form_Type=[F602|F603] -----------

 ------ One and only one of the following 4 check-boxes should be checked ------
 41 C    Ind_CB       1  Individual check-box
 42 C    Bus_CB       1  Business check-box
 43 C    Trade_CB     1  Industry/Trade/Professional check-box
 44 C    Oth_CB       1  Other check-box

 45 C    A_B_Name   200  Name A. Individual or B. Business Entity
 46 C    A_B_Adr1    55  Street 1 of A. Individual or B. Business Entity
 47 O    A_B_Adr2    55  Street 2 of A. Individual or B. Business Entity
 48 C    A_B_City    30  City of A. Individual or B. Business Entity
 49 C    A_B_ST       2  State of A. Individual or B. Business Entity
 50 C    A_B_ZIP4    10  ZIP+4 of A. Individual or B. Business Entity

 51 C    Descrip_1  300  Description of Business Activity, Industry or Other
 52 C    Descrip_2  300  Description of specific or other lobbying interests

 53 C    C_Less50     1  No. members in Industry Assoc - 50 or less
 54 C    C_More50     1  No. members in Industry Assoc - More than 50

 55 O    Ind_Class    3  Industry Classification
                         Values:  AGR - Agriculture
                                  EDU - Education
                                  GOV - Government
                                  HEA - Health
                                  LAB - Labor Unions
                                  LEG - Legal
                                  PUB - Public Employee
                                  POL - Political Organizations
                                  UTL - Utilities
                                  OTH - Other
 56 C    Ind_Descr  100  Description of Industry Classification if [OTH]er

 57 C    Bus_Class    3  Business Classification  (Req if Ind_Class is blank)
                         Values:  ENT - Entertainment
                                  FIN - Finance/Insurance
                                  LOG - Lodging/Restaurants
                                  MAN - Manufacturing/Industrial
                                  MER - Merchandise/Retail
                                  OIL - Oil & Gas
                                  PRO - Professional/Trade
                                  REA - Real Estate
                                  TRN - Transportation
                                  OTH - Other
 58 C    Bus_Descr  100  Description of Business Classification if [OTH]er
```

COVER PAGE RECORD LAYOUT FOR: F601; F602; ...; F607 (Continued)
==

```
   R{x}              Max
# C{x}  Field Name   Len  Description
-----  ----------   ---  -----------



------ Additional variable F602 fields follow when Form_Type=F602 ------------
59 R    Auth_Name    200  Name authorized of Lobbying Firm
60 R    Auth_Adr1     55  Street 1 of Filer
61 O    Auth_Adr2     55  Street 2 of Filer
62 R    Auth_City     30  City 1 of Filer
63 R    Auth_ST        2  State of Filer
64 R    Auth_ZIP4     10  ZIP+4 of Filer



------ Additional Variable F603 fields follow when Form_Type=F603 ------------
59 R    Lobby_Int    300  Description of Part III Lobbying Interests
60 R    Influen_YN     1  Attempt to Influence State Legislation?  Yes/No



------ Variable F604 fields follow when Form_Type=F604 ----------------------

41 R    Firm_Name    200  Name of Lobbyist Employer or Lobbying Firm

------ Only ONE of the next three fields (check-boxes/Date) should be coded ---
42 C    NewCert_CB     1  Will take a New Cert check-box "check-circle" #1
43 C    RenCert_CB     1  Will take a Renewal Cert check-box "check-circle" #2
44 C    Complet_Dt     8  Ethics Orient Course Completion
                          (Req if NewCert_CB and RenCert_CB are both blank)

------ Only ONE of the following 2 check-boxes should be checked -------------
45 C    Lby_Reg_CB     1  Lobby agcy in 601/603 Reg Stmt check-box #1
46 C    Lby_604_CB     1  Lobby agcy in this 604 Stmt check-box #2

47 C    St_Leg_YN      1  Will Lobby State Legislature? Y/N (Req if Lby_604_CB=X)
48 C    St_Agency    100  List of Identified State Agencies (Req if Lby_604_CB=X)



------ Variable F606/F607 fields follow when Form_Type=[F606|F607] ------------

41 R    Firm_Name    200  Name of Lobbyist Employer or Lobbying Firm

42 C    Lobby_CB       1  "Lobbyist within the meaning ..." check-box (F607 only)
43 C    L_Firm_CB      1  "Lobbying firm within the ..."    check-box (F607 only)
------ At least one of above two check-boxes must be used on F607 filings -----
```

```
 COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT
 =========================================================


   R{x}           Max
 # C{x} Field Name Len  Description
 -----  ---------- ---  -----------
 01 Rx  Rec_Type      4  Record Type Value: CVR2

 02 Rx  Form_Type     4  Form_Type (must equal Form_Type in CVR record)
                         Values:  F601; F602; F603

 03 Rx  Tran_ID      20  Transaction ID - permanent value unique to this item



 Note:  Remainder of CVR2 record is parsed depending on value of Form_Type.



 ------ Following variable fields used when Form_Type=[F601|F602] -------------

   R{x}           Max
 # C{x} Field Name Len  Description
 -----  ---------- ---  -----------

 04 Cx  Entity_Cd     3  Values: SCL - Subcontracted Client (F602, Cover/side1)
                                 MBR - Association member   (F602, Cover/side2)
                                 Null - Entity_Cd not required on Form 601

 05 C   Entity_ID     9  ID# of Entity (Partner, Owner, Officer, Employee)
                         on a F601 Part 1  (This person must also file a 604).

                         Note:  Entity_ID is required for F601 filings;
                                (i.e. when Entity_Cd not = 'SCL' or 'MBR')


 06 R   Enty_NamL   200  Lobbyist/Subcontracted Client/Assoc Member Last name
 07 C   Enty_NamF    45  Lobbyist/Assoc Member First name  (Req if NOT 'SCL')
 08 O   Enty_NamT    10  Lobbyist/Assoc Member Prefix/Title
 09 O   Enty_NamS    10  Lobbyist/Assoc Member Suffix
```

COVER PAGE ({2} ADDITIONAL NAMES/COMMITTEES) RECORD LAYOUT
==


```
  R{x}            Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------


------ Following variable fields used when Form_Type=F603 -------------------

  R{x}            Max
# C{x} Field Name Len  Description
----- ---------- ---  -----------

04 Rx  Entity_Cd    3  Values: FRM - Lobbying Firm (Right Col of Part I)
                               EMP - Employee Lobbyist (Left side of Part I)
                               AGY - State Agency (Listed in Part II)

05 C   Entity_ID    9  ID# of Entity (Lobbying Firm or Employee Lobbyist)
                       on a F603  (Employee Lobbyist must also file a 604).

                       Note:  Entity_ID is required for F603 filings;
                              (i.e. when Entity_Cd = 'FRM' or 'EMP')


06 R   Enty_NamL  200  Lobbying Entity or State Agency Last name
07 C   Enty_NamF   45  Lobbying Entity First name  (Req only if 'EMP')
08 O   Enty_NamT   10  Lobbying Entity Prefix or Title
09 O   Enty_NamS   10  Lobbying Entity Suffix
```

AMENDMENT INFORMATION (a.k.a.. Form 605; Part I)
==

```
  R{x}              Max
# C{x}  Field Name  Len  Description
-----   ----------  ---  -----------
01 Rx   Rec_Type      4  Record Type Value: F605
02 Rx   Form_Type     4  Form_Type (must equal Form_Type in CVR record)
                         Values:  F601; F603

03 Rx   Exec_Date     8  Date this Amendment executed on
04 Rx   From_Date     8  Report Period From Date of Original Report
05 Rx   Thru_Date     8  Report Period To/Through Date of Original Report

------ At least one of the Check-boxes below must be "checked"
06 O    Add_L_CB      1  Add Lobbyist check-box
07 C    Add_L_Eff     8  Add Lobbyist Effective Date
08 C    A_L_NamL    200  Add Lobbyist Last Name  (1st one changed)
09 C    A_L_NamF     45  Add Lobbyist First Name  (1st one changed)
10 O    A_L_NamT     10  Add Lobbyist Prefix/Title  (1st one changed)
11 O    A_L_NamS     10  Add Lobbyist Suffix  (1st one changed)
12 O    Del_L_CB      1  Delete Lobbyist check-box
13 C    Del_L_Eff     8  Delete Lobbyist Effective Date
14 C    D_L_NamL    200  Delete Lobbyist Last Name  (1st one changed)
15 C    D_L_NamF     45  Delete Lobbyist First Name  (1st one changed)
16 O    D_L_NamT     10  Delete Lobbyist Prefix/Title  (1st one changed)
17 O    D_L_NamS     10  Delete Lobbyist Suffix  (1st one changed)

18 O    Add_LE_CB     1  Add Lobbyist Employer check-box
19 C    Add_LE_Eff    8  Add Lobbyist Employer Effective Date
20 C    A_LE_NamL   200  Add Lobbyist Employer Last Name  (1st one changed)
21 O    A_LE_NamF    45  Add Lobbyist Employer First Name  (1st one changed)
22 O    A_LE_NamT    10  Add Lobbyist Employer Prefix/Title (1st one changed)
23 O    A_LE_NamS    10  Add Lobbyist Employer Suffix  (1st one changed)
24 O    Del_LE_CB     1  Delete Lobbyist Employer check-box
25 C    Del_LE_Eff    8  Delete Lobbyist Employer Effective Date
26 C    D_LE_NamL   200  Delete Lobbyist Employer Last Name  (1st one changed)
27 O    D_LE_NamF    45  Delete Lobbyist Employer First Name  (1st one changed)
28 O    D_LE_NamT    10  Delete Lobbyist Employer Prefix/Title (1st one changed)
29 O    D_LE_NamS    10  Delete Lobbyist Employer Suffix  (1st one changed)

30 O    Add_LF_CB     1  Add Lobbying Firm check-box
31 C    Add_LF_Eff    8  Add Lobbying Firm Effective Date
32 C    A_LF_Name   200  Add Lobbying Firm Name (first one changed)
33 O    Del_LF_CB     1  Delete Lobbying Firm check-box
34 C    Del_LF_Eff    8  Delete Lobbying Firm Effective Date
35 C    D_LF_Name   200  Delete Lobbying Firm Name (first one changed)

36 O    Other_CB      1  Other Amendments check-box
37 C    Other_Eff     8  Other Amendments Effective Date
38 C    Other_Desc  100  Description of changes.

39 O    F606_Yes      1  Lobbyist ceasing all activities (Form 606)
40 O    F606_No       1  Lobbyist ceasing employment, but remains active
```

```
 LOBBYIST EMPLOYERS/SUBCONTRACTED CLIENTS:  (F601P2A; F601P2B)
 ============================================================


   R{x}            Max
 # C{x}  Field Name Len  Description
 -----  ---------- ---  -----------
 01 Rx  Rec_Type     4  Record Type Value: LEMP

 02 Rx  Form_Type    7  Schedule Name/ID
                        Values:  F601P2A = F601/Part 2A - Client / Employer
                                 F601P2B = F601/Part 2B - Subcontract Client

 03 Rx  Tran_ID     20  Transaction ID - permanent value unique to this item

 04 O   Client_ID    9  ID# of Part 2A Employer or Part 2B Client/Employer
                        (This entity must also file a 602).

 05 R   Cli_NamL   200  Last Name of [Employing] Client
 06 O   Cli_NamF    45  First Name of [Employing] Client
 07 O   Cli_NamT    10  Prefix or Title of [Employing] Client
 08 O   Cli_NamS    10  Suffix of [Employing] Client
 09 R   Cli_Adr1    55  Address of [Employing] Client
 10 O   Cli_Adr2    55  Optional 2nd line of Address
 11 R   Cli_City    30  City
 12 R   Cli_ST       2  State code
 13 R   Cli_ZIP4    10  Zip+4
 14 R   Cli_Phon    20  Phone number

 15 R   Eff_Date     8  Effective Date of Lobbying Contract
 16 R   Con_Period  30  Period of Contract
 17 R   AgencyList  200 Agencies to be Lobbied
 18 R   Descrip    100  Description of Employer/Client Lobbying Interests


 ------ Following fields required for Form_Type=F601P2B ----------------------

 19 O   SubFirm_ID   9  ID# of Part 2b Subcontracting Lobbying Firm
                        (This entity must also file a 602).

 20 C   Sub_Name   200  Name of Subcontracting Lobbying Firm
 21 C   Sub_Adr1    55  Address of Subcontracting Lobbying Firm
 22 O   Sub_Adr2    55  Optional 2nd line of Address
 23 C   Sub_City    30  City
 24 C   Sub_ST       2  State code
 25 C   Sub_ZIP4    10  Zip+4
 26 C   Sub_Phon    20  Phone number
```