CAL Document: 2.01

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 a 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 lobbying disclosure 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 (CAL-ACCESS) California Automated Lobbying And Campaign Contribution & Expenditure Search System. 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 this system in the past two years.   Vendor feedback is welcome and has been solicited.

This filing format is being used as the basis for the design of the CAL-ACCESS system and will be used to receive filings from filing software that uses 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 Secretary of State and all changes or corrections to the format will be managed by the Secretary of State.

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)
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
461	Independent Expenditure Committee & Major Donor Committee Campaign Statement
465	Supplemental Independent Expenditure Report
470	Officeholder and Candidate Campaign Statement - Short Form
470S	Officer and Candidate Campaign Statement (Supplement)
495	Supplemental Pre-Election Campaign Statement
496	Late Independent Expenditure Report
497	Late Contribution Report
498	Slate Mailer Late Payment Report

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
635C	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

------   **[HDR]**   ------

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 that 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 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: 2.01
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 prevents 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 8 byte 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 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%. 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 CAL-ACCESS, 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.

YES/NO BOX PAIRS

Yes/No Boxes are represented on forms and schedules as two separate boxes. They are mutually exclusive in their use; however, if a filer checks both boxes in a Yes/No group, this should be interpreted the same as if neither box is checked. The results are stored in a single field in the electronic file - the only acceptable values in a Yes/No field are blank, "Y" and "N".

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, F470S)
    CTL   -   Controlled Committee (F460, F465, F496, F497, F410, F495)
    RCP   -   Recipient Committee (F425, F450, F460, F465, F496, F497, F410, F495)
    SMO   -   Slate Mailer Organization (F401, F498, F400, F402)
    BMC   -   Ballot Measure Committee (F450, F460, F465, F496, F497, F410, F495)
    MDI   -   Major Donor/Ind Expenditure (F461, F465, F496, F497)

ENTITY CODES USED ON FORMS & SCHEDULES (continued)

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:

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

  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 Authorizer (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/Assistant Treasure
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　　-　　Committee
RCP　　-　　Recipient Committee
IND　　-　　Individual
OTH　　-　　Other
PTY　　-　　Political Party
SCC　　-　　Small Contributor Committee

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
SPM   -   Supreme Court Justice

State District Offices

SEN   -   State Senator
ASM   -   State Assembly Person
BOE   -   Board of Equalization Member
PER   -   Public Employees Retirement System
APP   -   State Appellate Court Justice

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-character codes have been described by the FPPC for use on F460 / Schedules E, F and G. CALACCESS 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
FIL - candidate filing/ballot fees
FND - fundraising events
IND - independent expenditure supporting/opposing others (explain)*
LEG - legal defense
LIT - campaign literature and mailings
MBR - member communications
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
TRS - staff/spouse travel, lodging and meals
TSF - transfer between committees of the same candidate/sponsor
VOT - voter registration
WEB - information technology costs (Internet, e-mail)

Note: For Schedule D "Type of payment", codes "MON, "IKD" and "IND are the only valid codes. IKD and IND require an explanation.

CALACCESS 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'.

AMENDMENTS TO FORMS

When a filing is received, the CALACCESS system assigns a unique identifier known as the Filing Id. This filing id is printed on the acknowledgement notification that is emailed to you. The id is always preceded by "CA-" (i.e. CA-999999). You will need to use this filing id when amending this form. The id must be entered at the time of uploading your file to our system using the CALOAD utility.   This id is entered in the area titled:

This filing amends filing id: [999999] Along with sending us this id through the CALOAD utility, you need to increase the number in the field "Report_Num" found in every CVR record.   This number must be increased according to what amendment number you are sending (i.e. 001 = first amendment, 002 = second amendment).

Note: Your file will be rejected under the following conditions:
- You failed to provided a Filing Id, and Report_Num is greater than zero.
- You send the Report_Num out of sequence. (i.e. Report_Num = 003, but we have not received 002 yet, or Report_Num = 002, and we already have 002 on file)

Please view AMENDMENT PROCESSING OF ITEMS IN SCHEDULES found in the next page for additional amendment information.

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 original 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 its 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 summarization's - the main entries are summarization's 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 identifier 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) is 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 CALACCESS will attempt to "fit" short text memos

within the immediate proximity of the item to which the memo is attached, otherwise 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} C{x}	Field Name	Max 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-REFERENCING 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; 460/I	RCPT
460 Campaign Statement:	460/D; 460/E; 460/G	EXPN
460 Campaign Statement:	460/B1; 460/B2; 460/H	LOAN
460 Campaign Statement:	460/F	DEBT

BACK-REFRENCING TO RELATE "CHILD" SUBITEMIZATIONS BACK TO "PARENT" ITEMIZATIONS (Cont.)

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 CALACCESS system maintains references so that entities listed in "sub-itemizations" can be located in queries of the CALACCESS database.

The 460 Schedule G is a special case where ALL entries 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. CALACCESS will maintain references 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.

Child Records:

SPLIT TRANSACTION RECORD

#	R{x} C{x}	Field Name	Max Len	Description
01	Rx	Rec_Type	6	Record Type Value: SPLT
02	Rx	Pform_Type	6	Parent Schedule Type. Values: A, B1, B2, C, D, H, F450P5.
03	Rx	Ptran_Id	20	Parent Tran_ID.
04	R	Elec_Date	8	Date of Election
05	R	Elec_Amount	12	Per Election to Date Amount
06	R	Elec_Code	2	Per Election to Date Code. Values: P, G, S, R. (P = Primary, G = General, S = Special, R = Runoff)

Note: A parent RCPT Record could have one or many SPLT records. Here is a little sample of some ways the child split record may be used:

```
            1 to many
RCPT ------------------------> SPLT
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Record Samples
RCPT,A,MC5, etc...... (Parent)
SPLT,A,MC5, etc...... (Child)
SPLT,A,MC5, etc...... (Child)

****
Section 1 - Campaign Disclosure Reports
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401 Slate Mailer Organization Campaign 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

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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; Assistant 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; Assistant Treasurer
CVR3	F450	Cover Page; Verification Information
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
SPLT	Child	Split Transaction Record - Used as a child record for schedules: A, B1, B2, C, D, H and/or F450P5 when disclosing Per Election to Date information.

HDR	CAL	"CAL" Header record
CVR	F460	Cover Page; Recipient Committee Campaign Statement
CVR2	F460	Cover Page; Additional Committees, Asst. Treasurer, etc.
CVR3	F460	Cover Page; Part 4; Verification Information
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 Monetary Contributions Received
LOAN	B1	Schedule B Part 1 - Loans Received
LOAN	B2	Schedule B Part 2 - Loan Guarantors
RCPT	C	Schedule C - Nonmonetary Contributions Received
EXPN	D	Schedule D - Summary of Expenditures - Support/Oppose…
EXPN	E	Schedule E - Payments Made
DEBT	F	Schedule F - Accrued Expenses (Unpaid Bills)
EXPN	G	Schedule G - Payments Made "on behalf" of this Committee
LOAN	H	Schedule H - Loans Made to Others
RCPT	I	Schedule I - Miscellaneous Increases to Cash
SPLT	Child	Split Transaction Record - Used as a child record for schedules: A, B1, B2, C, D, H and/or F450P5 when disclosing Per Election to Date information.

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
RCPT	F496P3	Contributions of $100 or More Received

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

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#	R{x} C{x}	Field Name	Max 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, F465, F496, F497) CTL - Controlled Committee (F460, F465, F496, F497) RCP - Recipient Committee (F460, F425, F450, F465, F496, F497) SMO - Slate Mailer Organization (F401, F498) BMC - Ballot Measure Committee (F460, F450, F465, F496, F497) MDI - Major Donor/Ind Expenditure (F461, F465, F496, F497)
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

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

#	R{x} C{x}	Field Name	Max Len	Description
11	Cx	Stmt_Type	2	Type of Statement - Values: PE = Pre-Election (F450, F460) SE = Supplemental Pre-elect (F450, F460, F495) 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, F497)
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 Election (Req. on F450, F460, F461, F465)
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
23	O	File_Email	60	Email

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

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

#	R{x} C{x}	Field Name	Max Len	Description
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
40	O	Tres_Email	60	Email Address
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]

Note: Fields 42 through 45 are not used when Cmtte_Type = P (Please leave null)

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

------ Following fields used when Form_Type = F460 and Cmtte_Type = C ------

42	C	Flag1_YN	1	State Candidate Elec Committee?
				Value: "Y" or "N"
43	C	Flag2_YN	1	Recall Indicator?
				Value: "Y" or "N"

Note Field 44 & 45 are not used when Cmtte_Type = C, please leave null

------ Following fields used when Form_Type = F460 or F450 and Cmtte_Type = B -----

42	C	Flag1_YN	1	Primarily Formed Committee?
				Value: "Y" or "N"
43	C	Flag2_YN	1	Controlled Committee?
				Value: "Y" or "N"
44	C	Flag3_YN	1	Sponsored?
				Value: "Y" or "N"
45	C	Flag4_YN	1	Not used when Cmtte_Type = B

------ Following fields used when Form_Type = F460 or F450 and Cmtte_Type = G -----

42	C	Flag1_YN	1	Sponsored?
				Value: "Y" or "N"
43	C	Flag2_YN	1	Small Contributor Committee?
				Value: "Y" or "N"
44	C	Flag3_YN	1	Political Party/Central Committee?
				Value: "Y" or "N"
45	C	Flag4_YN	1	Not used when Cmtte_Type = G

#	R{x} C{x}	Field Name	Max Len	Description
46	C	AmendExp_1	100	Amendment Explanation line 1
47	O	AmendExp_2	100	Amendment Explanation line 2
48	O	AmendExp_3	100	Amendment Explanation line 3
				(Req if Report_Num > 0, and Form_Type = F460, F496, or F497)

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

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} C{x}	Field Name	Max 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

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

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

#	R{x} C{x}	Field Name	Max 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

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

#	R{x} C{x}	Field Name	Max 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}

COVER PAGE LAYOUT FOR DISCLOSURE REPORTS (Continued)

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

Note: Additional Cover Page information is found in the CVR2 and CVR3 records.
Please refer to these records for additional instructions.

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

#	R{x} C{x}	Field Name	Max 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

COVER PAGE RECORD LAYOUT FOR F470 OFFICEHOLDER/CAND
SHORT/SUPPLEMENT (Continue)

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

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.

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-5a Officeholder/Candidate info on CVR2 records with CVR2.Entity_Cd='CAO' and CVR2.F460_Part='5a'.

Code F460/Part-5b Name/Addr info for Related Committees on CVR2 records with CVR2.Entity_Cd=['COM'|'CTL'|'RCP'] and CVR2.F460_Part='5b'.

Code ADDITIONAL F460/Part-6a Ballot Measure info on CVR2 records with CVR2.Entity_Cd='BNM' and CVR2.F460_Part='6a'.

Code F460/Part-6b Officeholder/Candidate/Proponent info on CVR2 records with CVR2.Entity_Cd=['CAO'|'PRO'] and CVR2.F460_Part='6b'.

Code F460/Part-7 Name/Addr info for Candidate/Officeholder on CVR2 records with CVR2.Entity_Cd='CAO' and CVR2.F460_Part='7'.

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

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

#	R{x} C{x}	Field Name	Max 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

------ Following fields used for F425 Part/1; F450 Part/3; F460 (Parts 3, 5a,
------ 5b, 6a, 6b & 7) and F470/Part IV when Form_Type=[F425|F450|F460|F470].

#	R{x} C{x}	Field Name	Max Len	Description
04	Rx	Entity_Cd	3	Values: ATR - Assistant Treasurer (F425-P1, F450-P3, F460-P3) CAO - Cand/Officeholder (F460-P5a*, F460-P6b, F460-P7) COM - Committee (F460-P5b & F470-P4) CTL - Controlled Cmtte (F460-P5b & F470-P4) RCP - Recipient Cmtte (F460-P5b & F470-P4) PRO - Proponent (F460-P6b) BNM - Ballot Measure (F460-P6a*)

> * **Note:** CVR2 record(s) used for ADDITIONAL entries on F460 Part-5a and F460 Part-6a (if any).

#	R{x} C{x}	Field Name	Max Len	Description
05	Cx	F460_Part	2	Part of 460 cover page coded on this CVR2 record. Values: 3, 5a, 5b, 6a, 6b, or 7. (Req on F460 filings)

Note: 5a/5b & 6a/6b are "top/bottom" of Parts 5 & 6

#	R{x} C{x}	Field Name	Max Len	Description
06	C	Cmte_ID	9	Committee ID (Req. when Entity_Cd = [COM|CTL|RCP)

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

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

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

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

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

#	R{x} C{x}	Field Name	Max 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 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} C{x}	Field Name	Max 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, and Total to Date when Line_Item = 22A thru 22Z)
05	O	Amount_B	12	Summary Amount - Column B
06	O	Amount_C	12	Summary Amount - Column C (Column C Not Used in F460)
07	O	Elec_Dt	8	Date of Election

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. Please leave ExpLimt_Line and Elec_Dt null when not applicable. (Trailing Commas are not required).

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,	→	SMRY,F460,11,Amt_A,Amt_B
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,F460,22A,Amt_A,,,Elec_Dt	→	SMRY,F460,22Z,Amt_A,,,Elec_Dt
SMRY,A,1,Amt_A	→	SMRY,A,3,Amt_A
SMRY,B1,1,Amt_A	→	SMRY,B1,3,Amt_A
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,H,1,Amt_A	→	SMRY,H,3,Amt_A
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, and F401A)

#	R{x} C{x}	Field Name	Max Len	Description
01	Rx	Rec_Type	4	Record Type Value: RCPT
02	Rx	Form_Type	6	Sched Name: A = Sched A / Monetary; C = Sched C / Non-monetary; I = Sched I / Misc. to Cash; F401A = Payments Received F496P3 = Contributions of $100 or More 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, ...) PTY - Political Party; (F496P3 & F460) SCC - Small Contributor Committee (F496P3 & F460)
05	C	Ctrib_NamL	200	Contributor's Last name
06	C	Ctrib_NamF	45	Contributor's First name

RECEIPTS SCHEDULES (A, C, I, and F401A) (Continue)

#	R{x} C{x}	Field Name	Max Len	Description
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: F = Forgiven Loan; I = Intermediary; R = Returned (Negative Amount?); T = Third Party Repayment; X = Transfer

When Tran_Type = X

#	R{x} C{x}	Field Name	Max Len	Description
18	R	Trans_Date	8	Date of Transfer
19	R	Contr_Date	8	Original Date of Contribution

All other Tran_Type's

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

RECEIPTS SCHEDULES (A, C, I, and F401A) (Continue)

#	R{x} C{x}	Field Name	Max Len	Description
21	C	Cum_YTD	12	Cumulative YTD Amount (Sched A, 401A)
22	C	Hold_Amount	12	(Not used at this time)
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
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

#	R{x} C{x}	Field Name	Max Len	Description
34	O	Intr_NamL	200	Intermediary's/Transfer Last name
35	O	Intr_NamF	45	Intermediary's/Transfer First name
36	O	Intr_NamT	10	Intermediary's/Transfer Prefix or Title
37	O	Intr_NamS	10	Intermediary's/Transfer Suffix
38	C	Intr_Adr1	55	Intermediary/Transfer Street 1
39	O	Intr_Adr2	55	Intermediary/Transfer Street 2
40	C	Intr_City	30	Intermediary/Transfer City
41	C	Intr_ST	2	Intermediary/Transfer State
42	C	Intr_ZIP4	10	Intermediary/Transfer 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?

RECEIPTS SCHEDULES (A, C, I, and F401A) (Continue)

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

------ Fields 46 - 59 used on F401A -------------------------------------

#	R{x} C{x}	Field Name	Max Len	Description
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
65	C	Int_Rate	6	Loan Interest Rate (F496P3 Only)
66	Cx	Int_CmteId	9	Committee Id for Transfer or Intermediary (Required when Tran_Type = X)

Note: To disclose the Per Election to Date information, please refer to the "SPLT" record found in this document.

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

#	R{x} C{x}	Field Name	Max 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/Payments 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	Hold_Amount	12	(Not used at this time)
18	O	Expn_ChkNo	20	Check Number (Optional)

EXPENDITURE SCHEDULES (D, E, G, F450P5, F461P5, F465P3) (Cont.)

```
       R{x}                    Max
 #     C{x}   Field Name       Len    Description
---    ----   ---------------  -----  ------------------------------------------------------------
 19    C      Expn_Code        3      Expense Code  - Values:
                                      (Refer to list in Overview)
              Note: CTB (if non-monetary) & IND need explanation & listing on Sched D.

 20    C      Expn_Dscr        400    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

------ 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)
```

EXPENDITURE SCHEDULES (D, E, G, F450P5, F461P5, F465P3) (Cont.)

#	R{x} C{x}	Field Name	Max Len	Description
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 Description (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, F465)
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

Note: To disclose the Per Election to Date information, please refer to the "SPLT" record found in this document.

ACCRUED EXPENSES (UNPAID BILLS) SCHEDULE (F)

#	R{x} C{x}	Field Name	Max 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 (when non-monetary) & IND need explanation & listing on Sched D.
19	C	Expn_Dscr	400	Purpose of Expense and/or Description / explanation
20	C	Cmte_ID	9	Committee ID (If [COM|RCP] & no ID#, Treas info Req.)

ACCRUED EXPENSES SCHEDULE (Continued)

#	R{x} C{x}	Field Name	Max Len	Description
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) & MADE (H)

```
       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 1/ Loans Received;
                                      B2 = Sched B Part 2/ Loan Guarantors;
                                      H = Sched H, / Loans Made
03     Rx     Tran_ID          20     Transaction ID - permanent value unique to
                                      this item

04     C      Loan_TYPE        3      (Not used)  Please leave null.

05     C      Entity_Cd        3      Values: [COM|RCP] - Recipient Committee;
                                      (Req. on B1, and B2, not used on Sched. H);
                                      IND - Individual;
                                      OTH - Other;
                                      PTY - Political Party;
                                      SCC - Small Contributor Committee

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
```

Schedule B Part 1 (B1) --------------------------------

```
15     R      Loan_Date1       8      Date Loan Incurred (Original Date)
16     R      Loan_Date2       8      Date Due (Date Loaned Due)
17     R      Loan_Amt1        12     Loan Amount (Amount Received this Period)
18     C      Loan_Amt2        12     Outstanding Balance
19     C      Loan_Amt3        12     Cumulative Cont. to date(Calendar Year)
20     C      Loan_Amt4        12     Outstanding Balance Beg. this Period
21     R      Loan_Rate        30     Interest Rate Paid This Period
```
(Remaining Loan Amounts found in fields 49 through 54 of this Schedule)

LOAN SCHEDULES / RECEIVED & MADE (Continued)

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

Schedule B Part 2 (B2) -------------------------------

```
15      R       Loan_Date1      8      Date of Loan
16      R       Loan_Date2      8      N/A (Not Used)
17      C       Loan_Amt1       12     Amount Guaranteed this Period
18      R       Loan_Amt2       12     Balance Outstanding to Date
19      C       Loan_Amt3       12     Cumulative To Date (Calendar Year Amnt)
20      N/A     Loan_Amt4       12     N/A  (Not used)
21      C       Loan_Rate       30     N/A  (Not used)
```
(Remaining Loan Amounts found in fields 49 through 54 of this Schedule)

Schedule H; definitions (H) -------------------------------

```
15      R       Loan_Date1      8      Date Loan Made (Original Date)
16      R       Loan_Date2      8      Date Loan Due
17      R       Loan_Amt1       12     Amount Loaned This Period
18      C       Loan_Amt2       12     Outstanding Balance at Close of this Period
19      C       Loan_Amt3       12     Cumulative Loans to Date (Calendar Year)
20      C       Loan_Amt4       12     Outstanding Balance Beginning this Period
21      R       Loan_Rate       30     Interest Received Rate
```
(Remaining Loan Amounts found in fields 49 through 54 of this Schedule)

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

------ Fields 25 - 34 are used on F460/Sched B1 & B2 ------

```
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 or B2 [COM|RCP] & no ID#)
27      C       Tres_NamF       45     Treasurer's First name
                                       (Req if B1 or B2 [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 or B2 [COM|RCP] & no ID#)
```

LOAN SCHEDULES / RECEIVED & MADE (Continued)

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

-------- Following field used on Sched B Part 2 for Lender ------------

| 35 | O | Lender_Name | 200 | Lenders Name |

--------- Intermediary information ----------

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

LOAN SCHEDULES / RECEIVED & MADE (Continued)

Schedule B Part 1 (B1) & Part 2 (B2) --------------------------------
Note: Fields 49, 50, 51 and 52 are not used in (B2)

#	R{x} C{x}	Field Name	Max Len	Description
---	----	---------------	-----	--
49	C	Loan_Amt5	12	Amount Paid this Period(B1 only)
50	C	Loan_Amt6	12	Amount Forgiven this Period (B1 only)
51	C	Loan_Amt7	12	Amount of Interest Paid this Period(B1 only)
52	C	Loan_Amt8	12	Original Amount of Loan(B1 only)

Schedule H --------------------------------

#	C{x}	Field Name	Max Len	Description
49	C	Loan_Amt5	12	Amount Paid this Period
50	C	Loan_Amt6	12	Amount Forgiven this Period
51	C	Loan_Amt7	12	Amount of Interest Received this Period
52	C	Loan_Amt8	12	Original Amount of Loan

Note: To disclose the Per Election to Date information, please refer to the "SPLT" record found in this document.

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

#	R{x} C{x}	Field Name	Max 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** --------------------------------------

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

Form 401 Payment & Other Disclosure Sched (Continue)

#	R{x} C{x}	Field Name	Max Len	Description
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. Description (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} C{x}	Field Name	Max 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} C{x}	Field Name	Max 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	Rx	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, ...) PTY - Political Party SCC - Small Contributor Committee
05	R	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

Form 497 Late Contributions Received/Made (Continued)

#	R{x} C{x}	Field Name	Max Len	Description
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
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 Description (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 Recved (only if Form_Type = 'F498-R')
```

Form 498 Late Independent Expenditures Made (Continue)

------ Fields #20 & #34 are used when Form_Type = 'F498-A' ------------------

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

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Section 2 - Campaign Statements
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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} C{x}	Field Name	Max 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	Rx	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 thru 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)

--------- Address information for Org / Committee / Candidate or Office holder -------

#	R{x} C{x}	Field Name	Max Len	Description
14	R	Adr1	55	Street 1
15	O	Adr2	55	Street 2 (Overflow for Addr1)
16	R	City	30	City
17	R	ST	2	State
18	R	ZIP4	10	ZIP+4
19	R	Phone	20	Phone Number
20	R	County_Res	20	County of Domicile, Residence, or Location

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

#	R{x} C{x}	Field Name	Max Len	Description
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
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'].

#	R{x} C{x}	Field Name	Max Len	Description
39	C	Actvty_Lvl	2	Main level of Activity (Req. if SMO or GenPurp_CB=X) Values: CI = City; CO = County; ST = State

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

------ Fields 40 - 42 used on F400 Statement of Organization ---------------

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

#	R{x} C{x}	Field Name	Max Len	Description
43	O	Control_CB	1	Controlled Committee Check-box

Note: Name/Address info supplied on CVR2 record(s) with Item_Cd='CTL'.

#	R{x} C{x}	Field Name	Max Len	Description
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	Reservd_Dt	8	Reserved Date (not used at this time)
53	O	Reservd_Commt	90	Reserved Text Field (not used at this time)
54	O	PrimFC_CB	1	Primarily Formed Committee Check-box

Note: Name/Address info supplied on CVR2 record(s) with Item_Cd='PFC'.

#	R{x} C{x}	Field Name	Max Len	Description
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'.

#	R{x} C{x}	Field Name	Max Len	Description
58	O	BrdBase_CB	1	Broad Based Committee Check-box
59	O	SmCont_QualDt	8	Date Small Contributor Committee Qualified

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

#	R{x} C{x}	Field Name	Max 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 Commtte Item (F410) SPO - Sponsored Commtte Itemization (F410) SMA - Slate Mailer Authorizor (F400)

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

#	R{x} C{x}	Field Name	Max Len	Description
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(*Field Name Changed)

#	R{x} C{x}	Field Name	Max Len	Description
10	C	Cvr2_Adr1	55	Address (if Item_Cd = SPO)
11	O	Cvr2_Adr2	55	Optional 2nd line of Address
12	C	Cvr2_City	30	City (if Item_Cd = SPO)
13	C	Cvr2_ST	2	State code (if Item_Cd = SPO)
14	C	Cvr2_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}
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)

Note: 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.

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

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

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

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Section 3 - Lobbyist Disclosure Reports
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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

> **Note:** 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]

RecType	FormName	Description
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} C{x}	Field Name	Max Len	Description
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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 behalf of another Lobbyist Entity.)

COVER PAGE RECORD LAYOUT (Continue)

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

#	R{x} C{x}	Field Name	Max Len	Description
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 thru 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)

Note: 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} C{x}	Field Name	Max Len	Description
---	----	---------------	-----	---
16	C	Firm_Name	200	Name of Firm/Employer/Coalition (Req on F615)

Note: 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'.)

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

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

#	R{x} C{x}	Field Name	Max Len	Description
29	R	Sig_Date	8	Date when signed
30	R	Sig_Loc	45	City and State where signed

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

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

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

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

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

#	R{x} C{x}	Field Name	Max Len	Description
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; Sec. A)
51	C	RcpCmte_ID	9	Recipient Cmtte (or Major Donor) ID# (Part IV; Sec A)

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

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

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

#	C{x}	Field Name	Max Len	Description
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)

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

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

#	C{x}	Field Name	Max Len	Description
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} C{x}	Field Name	Max 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} C{x}	Field Name	Max 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'

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

ACTIVITY EXPENDITURE SCHEDULES: (cont.)

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

Note: 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

PAYMENTS MADE/RECEIVED TO/FROM LOBBYING FIRMS SCHEDULES: (Cont.)

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

PAYMENT TO OTHER LOBBYING FIRMS: (F625P3B) Cont.

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

CAMPAIGN CONTRIBUTIONS SCHEDULES: (Cont.)

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

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

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

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

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****************************************************************
* 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 *
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F601   Lobbying Firm Registration Statement
F602   Lobbying Firm Activity Authorization
F603   Lobbyist Employer or Lobbying Coalition Registration Statement
F604   Lobbyist Certification Statement
F605* Amendment to Registration, Lobbying Firm, Lobbyist Employer,
       Lobbying Coalition
F606   Notice of Termination
F607   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)

RecType	FormName	Description
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} C{x}	Field Name	Max 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.

#	R{x} C{x}	Field Name	Max Len	Description
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.)

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

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

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

Note: this date applies to F601, F603 and F604 forms

#	R{x} C{x}	Field Name	Max Len	Description
15	C	Eff_Date	8	Effective Date of Auth/Term (Req. if F602,F606,F607)
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)

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

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

  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"
```

------ 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
```

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

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

------ Additional variable F602 fields follow when Form_Type=F602 -------------

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

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

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

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

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

#	R{x} C{x}	Field Name	Max 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)

Note: 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')

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

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

#	R{x} C{x}	Field Name	Max 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)

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

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

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 Lobyist 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 Lobyist 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)
```

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

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

Note: This entity must also file a 602

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

LOBBYIST EMPLOYERS/SUBCONTRACTED CLIENTS: (F601P2A; F601P2B)

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

 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
        Note: 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
```

<u>Index Table</u>