

**LOBBYING - APPLICATION TO OBTAIN LOGON ID NUMBER AND PASSWORD TO  
FILE ONLINE OR ELECTRONICALLY**

1. I am submitting this application as a: *(check one)*  
 Responsible Officer of Lobbyist Employer     Responsible Officer of Lobbying Firm     Lobbyist  
 Other (specify) \_\_\_\_\_
2. The name of the filing entity or person for which an ID number and a password are requested is: *(type or print legibly)*

\_\_\_\_\_  
(full name) (ID# if known)

\_\_\_\_\_  
(street address) (city) (state) (zip code)

3. The filer for which an ID number and a password are requested is a: *(check one)*  
 Lobbying Firm     Lobbyist Employer/Coalition     Lobbyist     Payment to Influence Filer  
 Client of Lobbying Firm  
 Other (specify) \_\_\_\_\_

4. If you want to authorize an approved vendor to obtain your ID number and password for you, complete the following:

I intend for an approved vendor or service provider to submit my lobbyist activity documents electronically on my behalf. I hereby authorize:

\_\_\_\_\_  
(insert full name of approved vendor/provider)

to obtain my logon filing ID number and password in order to file my documents electronically.

5. If you are requesting an ID number and a password for a new client of a lobbying firm, indicate the name of the **lobbying firm**:

\_\_\_\_\_  
(insert full name of **lobbying firm**)

**Be sure to immediately amend your lobbying registration on paper with this office to reflect the new addition. It is the submitted paperwork, rather than the online/electronic filings, that will update your online record with the Office of the Secretary of State.**

6. If you are requesting an ID number and a password for a new lobbyist of a firm or lobbyist employer, indicate the name of the **lobbying firm or lobbyist employer**:

\_\_\_\_\_  
(insert full name of **lobbying firm or lobbyist employer**)

**Be sure to immediately amend your lobbying registration on paper with this office to reflect the new addition. It is the submitted paperwork, rather than the online/electronic filings, that will update your online record with the Office of the Secretary of State.**

7. I am entitled to file lobbying activity documents on behalf of the above entity or person.

8. I hereby apply for the issuance of a logon ID number and a password in order to file lobbying activity documents online/electronically.

9. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on \_\_\_\_\_ at \_\_\_\_\_  
(date) (where signed)

X \_\_\_\_\_  
(signature) (printed name of signer)

\_\_\_\_\_ \* \_\_\_\_\_  
(phone number) (fax number) (e-mail address if available)

\*Be sure to include your fax number so that the ID number and the password can be returned to you.

**NOTE: Any online or electronic filing, by an approved vendor or otherwise, is presumed to be filed under penalty of perjury. (Government Code section 84605(h))**

**FAX THIS APPLICATION TO (916) 653-5045**

**(BOTH PAGES MUST BE FAXED BEFORE THE APPLICATION CAN BE PROCESSED.)**

(If you have questions, call the Help Line at 916-653-7283 or 877-745-3453.)