

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
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SECRETARY OF THE SENATE
AUG 12 PM 3:1

LOBBYING REPORT
Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name State Affairs Company		
2. Address <input type="checkbox"/> Check if different than previously reported 925 L Street, Suite 300		
3. Principal Place of Business (if different from line 2) Sacramento CA 95814 City: State/zip (or Country)		
Contact Name BONNIE L. CHAFFE	Telephone 916-591-9902	5. Senate ID # 36526=51
7. Client Name <input type="checkbox"/> Self Hopland Band of Pomo Indians		6. House ID # 3456300

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report
10. Check if this is a Termination Report ⇔ Termination Date _____ 11. No Lobbying

INCOME OR EXPENSES Complete Either Line 12 OR Line 13	
<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇔ \$ <u>20,000.</u> = Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇔ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature *B. Chaffe* Date 8-6-03

Printed Name and Title BONNIE L. CHAFFE SR. VICE PRESIDENT



Registrant Name State Affairs Company Client Name Hopland Band of Pomo Indians

000282180

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code _____ (one per page)

16. Specific lobbying issues

NIGC Budget and Consultation Issues
HR-2143 and S-627 Internet Gaming
Tribal Government Tax Exempt Bonds
HR-4887 Tribal Government Act of 2002
FY 2004 Appropriation Riders

House(s) of Congress and Federal agencies contacted Check if None

Bureau of Indian Affairs, Department of Interior
House of Representatives
United States Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name

Covered Official Position (if applicable)

BONNIE L. CHAFE

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature *B. Chafe* Date 8-6-03

Printed Name and Title BONNIE L. CHAFE SR. VICE PRESIDENT



Registrant Name State Affairs Company Client Name Hopland Band of Pomo Indians

Information Update Page - Complete ONLY where registration information has changed.

00000282111

20. Client new address

21. Client new principal place of business (if different from line 20)

City _____ State/Zip (or Country) _____

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client



ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	O P cl

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant, client or affiliated organization

Signature *[Handwritten Signature]* Date 8-6-03

Printed Name and Title RONNIE L. CHAFF SR. VICE PRESIDENT