SECRETAR O4 MAR

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

LOBBYING REPORT

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

I. Registrant Name		
2. Address Check if different than previously reported	turciates	
2. Address Check if different than previously reported	**************************************	
G190 Rose Cart 3. Principal Place of Business (if different from line 2)		
- · · · · · · · · · · · · · · · · · · ·		
City: Grant Boy System	n (or Country) (757	4 L
City: Granit Boy State/z 4. Contact Name Telephone	E-mail (optional)	5. Senate ID #
~ 2 \sim 1	•	
X 677 Spracer 302/91/ 7. Client Name □ Self	6047	
		6. House ID #
Metapolita Deta Distric	t of Si. Cal	361570
TYPE OF REPORT 8. Year 2033 Midyer		
	(Year End (July 1-Dec
P. Check if this filing amends a previously filed version of this		Year End (July 1-Dec
9. Check if this filing amends a previously filed version of this 10. Check if this is a Termination Report Termination	report 🗆	Year End (July 1-Dec
10. Check if this is a Termination Report 🔲 🗢 Termination	on Date	, ,
· , , , , ,	on Dateerer Line 12 OR Line 13	, ,
10. Check if this is a Termination Report □	on Dateerer Line 12 OR Line 13	11. No Lobbyin
10. Check if this is a Termination Report □ □ □ Termination INCOME OR EXPENSES - Complete Eith 12. Lobbying Firms INCOME relating to lobbying activities for this reporting	n Date	11. No Lobbyin
10. Check if this is a Termination Report □ □ Termination INCOME OR EXPENSES - Complete Eith 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was:	n Date	11. No Lobbying anizations ganizations gactivities for this report
IO. Check if this is a Termination Report □ □ Termination INCOME OR EXPENSES - Complete Bits 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more □ \$ \$ 60,000.000	ireport In Date Iter Line 12 OR Line 13 13. Or EXPENSES relating to lobbying period were: Less than \$10,000 \$10,000 or more \$	11. No Lobbying ganizations ganizations gactivities for this report
INCOME OR EXPENSES - Complete Eith 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 \$10,000 or more \$\$\income \text{\$\subseteq} \t	ireport on Date ter Line 12 OR Line 13 13. Or EXPENSES relating to lobbying period were: Less than \$10,000 \$10,000 or more \$\Begin{array} \$14. REPORTING METHOD. Gaccounting method. See instructions of the second content of the second c	11. No Lobbying anizations ganizations gactivities for this report Expenses (nearest \$20,000) Check box to indicate expenses (nearest \$20,000)
INCOME OR EXPENSES - Complete Eith 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 \$10,000 or more \$\$\income \text{\$\subseteq} \t	ireport on Date ter Line 12 OR Line 13 13. Or EXPENSES relating to lobbying period were: Less than \$10,000 \$10,000 or more \$\$ 14. REPORTING METHOD. (accounting method. See instruction)	11. No Lobbying ganizations ganizations gactivities for this report Expenses (nearest \$20,000) Theck box to indicate exons for description of o
INCOME OR EXPENSES - Complete Eith 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 \$10,000 or more \$\$\income \text{\$\subseteq} \t	ireport in Date ter Line 12 OR Line 13 13. Or EXPENSES relating to lobbying period were: Less than \$10,000 \$10,000 or more \$\$ 14. REPORTING METHOD. Gaccounting method. See instruction Method A. Reporting amo	211. No Lobbying particular transfer of this report the Expenses (nearest \$20,000). Theck box to indicate expenses for description of ounts using LDA definitionals under section 6033

Filing #2c645b19-a5e9-4cdc-8392-d3535d390d83 - Page 1 of 6

Signature	127-1	Date -	1-23-04
<i>₽</i> -	Kens Spiner		
LD-2 (REV. 4/03)			PAGE 1 c

Registrant Name Spencer Robert Client	Name Matapalite. Water Distr
LOBBYING ACTIVITY. Select as many codes as necessengaged in lobbying on behalf of the client during the repoint formation as requested. Attach additional page(s) as needed	ssary to reflect the general issue areas in which the rting period. Using a separate page for each co
15. General issue area code AT (one per page)	
16. Specific lobbying issues	
Water Agracments	
17. House(s) of Congress and Federal agencies contacted **Jours of Representatives Dept. of the Interior	☐ Check if None
18. Name of each individual who acted as a lobbyist in this is	ssue area
Name Name	Covered Official Position (if applicable)
Leas Spiner Start K Spiner	***************************************
	,
19. Interest of each foreign entity in the specific issues listed on	line 16 above Check if None
Signature #2c645b19-a5e9-4cdc-8392-d3535d39	DateDate

Printed Name and Title Zone Vine Vine Vine

Page _____

formation Update P	'age - Complete ONLY w	here registration information	п паз спануес.
). Client new address			
I. Client new principal place of l	business (if different from line 20)	\$ _{\$\$}
ity		State/Zip (or Country)	7 <u>2 17 3 4 5 5 5 7 5 4 4 4 4 5 5 5 5 7 7 7 4 4 4 4</u>
2. New general description of cl	ient's business or activites	,	
OBBYIST UPDATE 3. Name of each previous	y reported individual who i	s no longer expected to act as	a lobbyist for the clie
SSUE UPDATE	s previously reported that n	o longer pertain	
. Contrat 1000 / M.B 1000			
AFFILIATED ORGAN 25. Add the following affili			
AFFILIATED ORGAN		Address	•
AFFILIATED ORGAN 25. Add the following affili		Address	•
AFFILIATED ORGAN 25. Add the following affilinate	iated organization(s)	Address Address It is no longer affiliated with	(city and state or o
AFFILIATED ORGAN 25. Add the following affilinate	iated organization(s)		Principal Place of (city and state or o
AFFILIATED ORGAN 25. Add the following affiling Name 26. Name of each previous	iated organization(s)		(city and state or e
AFFILIATED ORGAN 25. Add the following affilinate Name 26. Name of each previous	iated organization(s)		(city and state or the registrant or client
AFFILIATED ORGAN 25. Add the following affiling Name 26. Name of each previous FOREIGN ENTITIES 27. Add the following fore	iated organization(s)	nt is no longer affiliated with	(city and state or

Printed Name and Title X6:0 Spine - Freuidal

Page ____

Form LD-2 (Rev. 4/03)