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 REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is a	n Amended Registration	п		1. Effective Date of Registration		10/02/2005	
2. House Identification Number 36674				Senate Identification Number		85138	
REGISTRAN	NT ame GA	GE, LLC					
Address 12	2 C Street NW Suite 3	80		a,			
City Wa	ashington		State [C	Zip 20001	USA	
4. Principal pla	ace of business (if diffe	erent than line	3)				
City			State		Zip		
5. Telephone n	umber and contact nan	ne		٠			
202	393 4262	Contact Ms.	Beth	Hamilton	E-mail beth@gage.cc		
	cription of registrant's Lobbying and Genera				·		
7. Client name	eled "Self" and proceed to line Nelson American H	± 10. □Sel		ch client. Organ	izations employing in-house lobbyists	should check the bo	
Address 111	02 9th Street South		***************************************				
City Gr	eat Falls		State	MT	Zip 59404	US	
8. Principal pla	ace of business (if diffe						
City			State	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Zip		
9. General des Home Build	cription of client's bus	iness or activi	ities				
section has	ch individual who has act served as a "covered exec	cutive branch o	fficial" or	r "covered leg e position(s) ir	or the client identified on line 7. islative branch official" within a which the person served. overed Official Position (if appl	two years of firs	
Leo .	Giacometto			.,			
Robert	Arensberg				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ! !	
Will	Hunt						
Trey	Barnes						
Jeff	Johnson		848457077754774444		.,		
LD-1DS (Rev. 044)3) ·					Page 1	

Registrant Name GAGE, LL	.c	Client Name Nelson A	_{lame} Nelson American Homes					
LOBBYING ISSUI		codes list	ed in instructions and on the	e reverse side of Form LE)-1, page			
BUD	·							
12. Specific lot-bying issue identify and secure cor	•	ith the loc	al, state and federal gove	ernment				
AFFILIATED ORC 13. Is there an entity other a semiannual period an	than the client that contrib	utes more t plans sup	than \$10,000 to the lobbyin ervises or controls the regis	g activities of the registra trant's lobbying activities	nt in			
No ⇔ Go to line	14.	Yes Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.						
Name		Addı	ess	Principal place of Business (city and state or country)				
b) directly or in	itity that: t 20% equitable ownership	jor part, pl	nt or any organization ident ans, supervises, controls, di ; O r		zes activ			
c) is an affiliate lobbying acti	of the client or any organivity?	ization ide	ntified on line 13 and has a	direct interest in the outco	ome of t			
No ➪ Sign and da	te the registration.			est of this section for each iteria above, then sign an				
Name:	Address		Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owr perc in c			
signature	1 /M/m		Date	14/21/05	-			
rinted Name and Title	Robert Arensberg, Pr	esident						