

SECRETARY OF THE SEN,  
04 DEC -1 PM 3:22

Pete Homer  
4004 David Ln.  
Alexandria, Va. 22311

November 15, 2004

Secretary of the senate  
Office of Public Records  
232 Hart Senate Office Building  
Washington D.C. 20510

Dear Sir:

Attaching my semi-annual lobbying report for period January 1, 2004 to June 30, 2004. Registrant name: Pete Homer, client name: Colorado River Indian Tribes, D # 35134000.

Sincerely

  
Pete Homer



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

SECRETARY OF THE SEN  
04 DEC -1 PM 3:2

## LOBBYING REPORT

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

1. Registrant Name <u>PETE HOMER</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>4004 DAVID LANE</u>			
3. Principal Place of Business (if different from line 2) City: <u>ALEXANDRIA</u> State/Zip (or Country) <u>Va.</u> <u>22311</u>			
4. Contact Name <u>PETE HOMER</u>	Telephone <u>703-998-8177</u>	E-mail (optional)	5. Senate ID <u>3513</u>
7. Client Name <input type="checkbox"/> Self			6. House ID

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☒ OR Year End (July 1-E

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 Lobby

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p><b>12. Lobbying Firms</b></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>11,000</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><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this 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><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>
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Signature Pete Homer

Printed Name and Title PETE HOMER, CRIT CONSULTANT

LD-2 (REV. 6/98)

Registrant Name PETE HOMER Client Name COLORADO RIVER INDIA

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the lobbyist 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 IND (one per page)

16. Specific lobbying issues

NONE

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

DEPT. OF INTERIOR

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

Name	Covered Official Position (if applicable)
<u>PETE HOMER</u>	<u>CRIT CONSULTANT</u>

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature

Pete Homer

Date

11-15-04

Printed Name and Title V PETE HOMER, CRIT CONSULTANT

Form LD-2 (Rev. 6/98)

Page

Registrant Name PETE HOMER Client Name COLORADO RIVER INDIAN
**Information Update Page - Complete ONLY where registration information has changed.**

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 B: (city and state or c

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

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

\_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

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Page \_\_\_\_\_