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03 AUG 20 PM

LOBBYING REPORT

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

1. Registrant Name <u>Spencer - Roberts & Associates</u>	
2. Address <input type="checkbox"/> Check if different than previously reported <u>6190 Rose Ct</u>	
3. Principal Place of Business (if different from line 2) City: <u>Garita Bay</u> State/zip (or Country) <u>Ca 95712</u>	
4. Contact Name <u>Karen Spencer</u>	5. Senate ID #
Telephone <u>916-791-9013</u>	E-mail (optional)
7. Client Name <input type="checkbox"/> Self <u>Metropolitan Water District of So. Cal</u>	6. House ID #

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>15,000</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 exp accounting method. See instructions for description of opt</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(l) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature Xa na Date 1-7-05

Printed Name and Title Kari Spencer

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PAGE 1 of

Registrant Name Spencer Roberts Client Name MWD

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 NNT (one per page)

16. Specific lobbying issues

Sec 417 of Resource Code

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

Interior
House of Representatives

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

Name	Covered Official Position (if applicable)
<u>Karen Spencer</u>	
<u>Sharon K Spencer</u>	

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

Signature [Signature] Date 8-9-03

Printed Name and Title

Loren Spencer

Form LD-2 (Rec. 4/03)

Page _____

Registrant Name Spencer-Kelley Client Name MWP

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 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

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

Signature [Signature] Date 8-9-03

Printed Name and Title

Karen Green

Form LD-2 (Rev. 4/03)

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