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**LOBBYING REPORT**

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

1. Registrant name			
Organization		ML Strategies, LLC	
2. Address <input type="checkbox"/> Check if different than previously reported			
701 Pennsylvania Avenue, NW		Suite #900	
City	Washington	State	DC
Zip Code	20004	Country	USA
3. Principal place of business (if different than line 2)			
City		State	
Zip Code		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Mark Buse	202-434-7435	mbuse@mlstrategies.com
7. Client Name <input type="checkbox"/> Self		5. Senate ID #	
Cablevision		25603-152	
		6. House ID #	
		33962007	

**TYPE OF REPORT** 8. Year 2005 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 Activity ☐

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

<p align="center"><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was: <input type="checkbox"/></p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>60,000</u></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 align="center"><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were: <input checked="" type="checkbox"/></p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ <u>          </u></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options. <input checked="" type="checkbox"/></p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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**Form Complete**Printed Name and Title for Mark Buse, Vice President of Government Relations

8-10-05



Registrant Name ML Strategies, LLCClient Name Cablevision

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

15. General issue area code COM - Communications/Broadcasting/Radio/TV (one per page)

16. Specific lobbying issues

Issues related to the cable and program distribution industry.

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

U.S. Senate  
U.S. House of Representatives

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

Name			Covered Official Position (if applicable)	N
First Name	Last Name	Suffix		
David	Leiter			<input type="checkbox"/>
Karen	Knutson			<input type="checkbox"/>
Mark	Buse			<input type="checkbox"/>
Patrick	Mara			<input type="checkbox"/>
Neal	Martin			<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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

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Printed Name and Title Mark Buse, Vice President of Government Relations 8-10-05

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**Client Name**    **Cablevision**

## 20. Client new address

### Address

City

State

**Zip Code**

Country

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

City

## State

**Zip Code**

Country

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

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

**First Name**

Last Name

### Suffix

**First Name**

Last Name

### Suffix

1

3

2

4

**Find the code to select below.**

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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25. Add the following affiliated organization(s)

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

1	2	3
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27. Add the following foreign entities

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

1	3	5
2	4	6

*Add a page for more updates*

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