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LOBBYING REPORT

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

Registrant Name ML Strategies, LLC			
Address Check if different than previously re	eported		
701 Pennsylvania Avenue, NW			
Principal Place of Business (if different from line 2)	·•.		
City: Washington	State/Zip	(or Country) DC 20004	
. Contact Name To	elephone	E-mail (optional)	5. Senate ID#
David J. Leiter	(202) 434-7346	dleiter@mlstrategies.com	2560
. Client Name Self			6. House ID#
The Manufacturers Life Insurance Co.	(USA)		3396
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Printed Name and Title____

LD-2 (REV. 6/98)

egistrant Name	ML Strategies, LLC	Client Name	The Manufacturers Life Insurance Co. (US
ngaged in lobbying	VITY. Select as many coogon behalf of the client durested. Attach additional pa	ing the reporting pe	eflect the general issue areas in which the riod. Using a separate page for each co
5. General issue a	rea code INS (on	e per page)	
6. Specific lobbyi	ng issues		<u></u>
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7. House(s) of Co	ongress and Federal agencie	es contacted	☐ Check if None
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o. Italie of caon	individual who acted as a l		Covered Official Position (if applicable)
David J. Leiter		Pri 	ncipal Deputy Assistant Secretary, DOE
19. Interest of each	foreign entity in the specific	issues listed on line 10	5 above Check if None
F) 01/0		
Signature (Janil (Lerti		Date 2/3/03

Printed Name and Title David O. Lener, vice i resident of containing in the second of

Form LD-2 (Rev.6/98)

Registrant Name	ML Strategies, LLC	Client Name	The Manufacturers Life Insurance Co. (USA)
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16. Specific lobbyi General insurance	ng issues ce related issues	<u></u>	
17. House(s) of Co	ongress and Federal agencie	es contacted	☐ Check if None
18. Name of each	individual who acted as a l	obbyist in this issue	c area Covered Official Position (if applicable)
David J. Leiter		Pri	incipal Deputy Assistant Secretary, DOE
19. Interest of each	n foreign entity in the specific	issues listed on line 1	6 above Check if None
Signature	David Leite	 ~	Date 2/3/03

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