

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

SECRET  
03 MAR

# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐

1. Effective Date of Registration 3/1/03

2. House Identification Number \_\_\_\_\_

Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name GARRY MAURO

Address PO Box 13083

City AUSTIN, TX

State TX

Zip 78711

4. Principal place of business (if different from line 3)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

(512) 477-6944

Contact \_\_\_\_\_

E-mail (optional) \_\_\_\_\_

6. General description of registrant's business or activities

LEGISLATIVE CONSULTANT

**CLIENT** A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10. ☐ Self

7. Client name METABOLIFE INTERNATIONAL

Address 5643 COPLEY DRIVE

City SAN DIEGO

State CA

Zip 92111

8. Principal place of business (if different from line 7)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person this section has served as a "covered executive branch official" or "covered legislative branch official" within two years acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>GARRY MAURO</u>	



Registrant Name GARRY MAURO Client Name METABOLIFE INTERNATIONAL

### LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

HCR

12. Specific lobbying issues (current and anticipated)

REGULATION OF DIETARY SUPPLEMENTS

### AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

☒ 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	Address	Principal Place of Business (city and state or country)

### FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**  
 b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or supervises the lobbying activities of the client or any organization identified on line 13; **OR**  
 c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the client's lobbying activity?

☒ No → Sign and date the registration.

☐ Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature

Garry Mauro

Date 3-1-03

Printed Name and Title ( )

Form LD-1 (Rev. 06/98)

SECRETARY OF THE SENATE  
03 MAR 13 AM 9:07

Office of the Clerk  
Legislative Resource Center  
Lobby Disclosure Act  
Request for Notification of Receipt by E-mail

Please complete the following information if you would like to receive an e-mail confirming receipt of your original filing. Please list each client House Identification Number separately.

Registrant's Name:

MR GARRY MAURO

Client House Identification Number:

Contact Name:

Contact Title:

Contact E-mail Address:

GMAURO@AUSTIN.LR.COM

Contact's Daytime Phone Number:

512-477-6944

CLEAR FORM

PRINT FORM

