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LOBBYING REPORT

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

1. Registrant name		A . A		
Organization ML Strategles, LLC		\$ 2.0		
2. Address Check if different than previously reported				
701 Pennsylvania Avenue, NW	Suite #900	The state of the s		
City Washington - State C	Zip Code 20004	Country USA		
3. Principal place of business (if different than line 2)	ag same to be ag a	· · · · · · · · · · · · · · · · · · ·		
City State City State/2	Zip Code	2001 () M		
City State 2 4a. Contact Name b. Telephone number Prefix Full Name	c. E-mail	5. Senate ID #		
Prefix Full Name Mr. Mark Buse 202-434-7435 mbt	se@mlstrategies.com	25603-176		
7. Client Name Self National Cable Telecommunications Association		6. House ID# 33962008		
TYPE OF REPORT 8. Year 2005 Midyear (Janua	ry 1-June30) 🗵 OR Y	(ear End (July 1-December 31)		
Check if this filing amends a previously filed version of this report				
10. Check if this is a Termination Report Termination Date	the second of th	11. No Lobbying Activity		
INCOME OR EXPENSES - Complete Either Line	12 OR Line 13	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
12. Lobbying Firms	13. Org	ganizations		
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying were:	g activities for this reporting perio		
Less than \$10,000	Less than \$10,000			
\$10,000 or more ⊠ ⇔ \$ 40,000	\$10,000 or more	\$		
Provide a good faith estimate, rounded to the nearest \$20,000,	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.			
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).	Method A. Reporting amounts using LDA definitions only Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code			
		nounts under section 162(e) of the Into		
		Form Comple		
<i>∆</i> () 0	11-1			
1. Khul	Helly			

Filing #bf93c46f-1f81-43b1-866a-73fa1ca4a875 - Page 1 of 6

ngaged in lob	ACTIVITY. Select as no bying on behalf of the cli requested. Attach additi	ent during the repo	ssary to reflect the general issue rting period. Using a separate ded.	page for each code, p
	sue area code TEC - Tele	T met	(one per page)
6. Specific lo	bbying issues			
Issues affe	cting the cable television	and telecommunica	tions industries.	
7 House(s) (of Congress and Federal a	ngencies contacted	Check if None	
U.S. Senat	Control of the contro		The second secon	
	. >			
8. Name of e	each individual who acted	l as a lobbyist in th	s issue area	
	Name		s issue area Covered Official Position (i	f applicable)
First Name		l as a lobbyist in th		fapplicable)
First Name David	Name Last Name			f applicable)
First Name David Karen	Name Last Name Leiter			f applicable)
First Name David Caren Mark	Name Last Name Leiter Knutson			fapplicable)
First Name David Caren Mark	Name Last Name Leiter Knutson Buse	Suffix		fapplicable)
First Name David Karen Mark Patrick	Name Last Name Leiter Knutson Buse Mara	Suffix		fapplicable)
First Name David Karen Mark Patrick	Name Last Name Leiter Knutson Buse Mara	Suffix		fapplicable)
First Name David Karen Mark Patrick Neal	Name Last Name (Leiter Knutson Buse Mara Martin	Suffix		
First Name David Karen Mark Patrick Neal	Name Last Name (Leiter Knutson Buse Mara Martin	Suffix	Covered Official Position (i	

Printed Name and Title Mark Buse, Vice President of Government Relations 8-12-05

LD-2DS (REV. 4/03)

Page 2 of

Registrant Name ML Strat	egies, LLC	Client Name National C	Cable Telecommunicat	tions Assoc	
Information Upda	te Page - Complete ONLY w	here registration infor	mation has changed	l.	
20. Client new address Address City		State Zip Code		`	
City 22. New general descript	ion of client's business or activities	State Zip Code	Country		
LOBBYIST UPDAT 23. Name of each prev First Name 1	E iously reported individual who is Last Name Suffix	no longer expected to act a First Name 3	as a lobbyist for the clic	ent Suffix	
ISSUE UPDATE 24. General lobbying is	ssues that no longer pertain	Find the code to	select below.		
AFFILIATED ORG	ANIZATIONS affiliated organization(s)				
Name		Address		Principal place of Business (city and state or country)	
	Address C/S/Z Address C/S/Z		City State Coun City State Coun		
26. Name of each prev	iously reported organization that i	is no longer affiliated with	the registrant or client		
FOREIGN ENTITI 27. Add the following					
Name	Address Street Address City State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage i client	
		City Country		1	
affiliated organization	3	onger owns, <u>or</u> controls, <u>or</u> is		rant, client (
Dooumont di	gitally signed on Page 1.		Add a page for r	nore updates	

LD-2DS (REV. 4/03)

Page _3__ of __