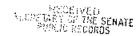
Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



00 450 28 AM 9: 09 LOBBYING REGISTRATION Ladytismal Lobbilist Lobbying Disclosure Act of 1995 (Section 4) Check if this is an Amended Registration 1. Effective Date of Registration 2. House Identification Number Senate Identification Number /0788 REGISTRANT Registrant name Address City State DC 4. Principal place of business (If different from line 3) City State/Zip (or Country) 5. Telephone number and contact name E-mail (optional) 204 682-3139 5. General description of registrant's business or activities Manufacturine CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbying thould check the box 7. Client name Address City Zip State E. Principal place of business (if different from line 7) City State/Zip (or Country) General description of client's business or activities OBBYISTS 3. Name of each individual who has acted or is expected to act as a lobbylist for the client identified on line 7. If any person listed in this section, has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served. Covered Official Position (if applicable) ris ED-1 (Rev. (8898) Page I

| <ol> <li>General lobbying i</li> <li>/MM LB#</li> </ol>                            |   | pplicable codes listed in instructions a  | nd on the reverse side of Form  | a LD-1, page 1.  |
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| Boadtand Li<br>Foreign Sale<br>Civil Just<br>FFILIATED O                           | RGANIZATIO  | Act of 2000<br>NS   |   |  |
|  | od and in whole or in   | at contributes more than \$10,000 to<br>major part plans, supervises or con<br>Yes I Complete the res<br>the criteria above   | trols the registrant's lobbyi   | ng activities?<br>tity matching                            |
| Name   |   | Address   | Principal Place of (city and state or   | Business   |
|  |   |   |   |  |
|  | 4.55  | many a profession of the  | ation identified on line 13:  |  |
| b) directly or<br>activities (<br>c) is an affilia<br>of the lobb                  | indirectly, in whole of the client or any or  | matching the  | controls, directs, finances of<br>and has a direct interest in<br>the rest of this section for e<br>the criteria above, then sign   | r subsidizes the outcome ach entity                        |
| b) directly or<br>activities (<br>c) is an affilia<br>of the lobb                  | indirectly, in whole of<br>the client or any or<br>are of the client or any<br>ying activity?                         | or in major part, plans, supervises, iganization identified on line 13; 01 y organization identified on line 13   | controls, directs, finances of and has a direct interest in the rest of this section for ene criteria above, then sign the control of contribution for  | r subsidizes the outcome ach entity                        |
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