

Katharine Armstrong, Inc. -7 AM 10: 08

Consulting • Business • Government • Non-Profit

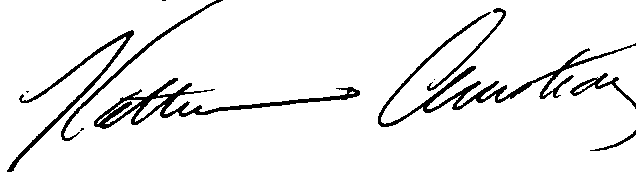
MEMO

March 16, 2005

To Whom It May Concern:

Please note that I, Katharine Armstrong, did send in a Lobby Report for my client, Prionics (287155-12), nearly 8 months ago in August. I am unsure as to why your office did not receive it but I am happy to send a new report. I have enclosed a copy of the original report sent last August as well as a new copy. Please call my assistant, Michelle, for any other concerns at: 512/478-1003.

Thank you,



Katharine Armstrong

1122 Colorado Street, Suite 500

Austin, TX 78701

O (512) 478-1003 • F (512) 478-1211 • C (512) 771-9462 • katarminc@earthlink.net

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
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SECRETARY OF THE SENATE
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LOBBYING REPORT

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

1. Registrant Name Katharine Armstrong			
2. Address <input type="checkbox"/> Check if different than previously reported 1122 Colorado, Ste. 300			
3. Principal Place of Business (if different from line 2) Austin TX 78701 City: State/zip (or Country)			
4. Contact Name Katharine Armstrong	Telephone (512) 478-1003	E-mail (optional)	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Prionics			6. House ID #

TYPE OF REPORT 8. Year 2004 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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇔ \$ <u>60,000.00</u> Income (nearest \$20,000)</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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇔ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of accounting method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature _____ Date 8/15/2004

Printed Name and Title Katharine Armstrong, President

Registrant Name Katharine Armstrong Client Name Pronics

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

15. General issue area code AGR (one per page)

16. Specific lobbying issues

Issues pertaining to the cattle industry.

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

The Administration and Department of Agriculture.

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

Name	Covered Official Position (if applicable)
Katharine Armstrong	

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

Signature _____ Date 8/15/2004

Printed Name and Title Katharine Armstrong, President

Registrant Name Katharine Armstrong Client Name Prionics

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

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

City _____ State/Zip (or Country) _____

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

LOBBYIST UPDATE

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

ISSUE UPDATE

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

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of E (city and state or c

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

FOREIGN ENTITIES

27. Add the following foreign entities

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

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

Signature _____ Date 8/15/200

Printed Name and Title Katharine Armstrong, President

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
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05 APR -7 AM 10:

LOBBYING REPORT

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2. Address <input type="checkbox"/> Check if different than previously reported <u>1122 Colorado, Suite 300</u>			
3. Principal Place of Business (if different from line 2) City: <u>Austin</u> State/Zip (or Country) <u>TX 78701</u>			
4. Contact Name <u>Michelle Smith</u>		Telephone <u>512/478-1003</u>	E-mail (optional)
7. Client Name <input type="checkbox"/> Self <u>Prionics</u>		5. Senate ID # <u>28715</u>	6. House ID # <u>37009</u>

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Signature Katharine Armstrong

Printed Name and Title

Katharine Armstrong

J

Registrant Name Katharine Armstrong Client Name Prionics

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, information as requested. Attach additional page(s) as needed.

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Name	Covered Official Position (if applicable)
<u>Katharine Armstrong</u>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature *Katharine Armstrong* Date 3.16.05

Printed Name and Title Katharine Armstrong, President

Registrant Name Katharine Armstrong Client Name PRIONICS

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Signature  Date 3.16.05
Printed Name and Title Katharine Armstrong, President

