

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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## LOBBYING REPORT

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

1. Registrant Name <b>Hart Health Strategies</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>3823 Fordham Road, N.W.</b>			
3. Principal Place of Business (if different from line 2) <b>Washington, D.C.</b> <b>20016</b> City: State/zip (or Country)			
4. Contact Name <b>Vicki Hart</b>	Telephone <b>(202) 441-3515</b>	E-mail (optional) <b>vhart@hhstrategies.com</b>	5. Senate ID # <b>84673113</b>
7. Client Name <input type="checkbox"/> Self <b>Pharmaceutical Research Manufactureres of America</b>			6. House ID # <b>36355008</b>

**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 Activities ☐

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center"><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> 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 type="checkbox"/> ⇨ \$ <u>\$160,000.00</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 align="center"><b>13. Organizations</b></p> <p><b>EXPENSES</b> 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><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA defined Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162 Internal Revenue Code</p>
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Signature \_\_\_\_\_

*Vicki Hart*

Date **07-27-04**

Vicki Hart, President



Registrant Name Hart Health Strategies Client Name Pharmaceutical Research Manufactureres of An

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

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

16. Specific lobbying issues

Monitoring health legislation and regulation

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

Department of Health and Human Services  
U. S. Senate  
U.S. House of Representatives

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

Name	Covered Official Position (if applicable)
Vicki Hart	

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

Signature

*Vicki Hart*

Date

07-27-04

Printed Name and Title

Vicki Hart, President



Registrant Name Hart Health Strategies Client Name Pharmaceutical Research Manufacturere

**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 B (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

*Vicki Hart*

Date

07-27-0

Printed Name and Title Vicki Hart, President

