

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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RECEIVED,  
SECRETARY OF THE

05 MAR 11 PM

**LOBBYING REPORT**

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

1. Registrant name				
Organization		Artemis Strategies		
2. Address <input type="checkbox"/> Check if different than previously reported				
Address1		1401 New York Avenue		Suite 1010
City		Washington	State	DC
		Zip Code	20005	
				Country
		US		
3. Principal place of business (if different than line 2)				
City		State	Zip Code	Country
City		State/Zip or Country		
4a. Contact Name		b. Telephone number		c. E-mail
Prefix	Full Name			
Mr.	Ari Storch	202-783-1080	astorch@artemisdc.com	
7. Client Name <input type="checkbox"/> Self				5. Senate ID #
Hansen Government Relations				82990
				6. House ID #
				36401

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December
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 Acti

**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 checked="" type="checkbox"/> ⇒ \$ <u>20,000</u></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 were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate exp accounting method. See instructions for description of opt</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions c</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8 Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Revenue Code</p>
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Form C

Printed Name and Title Ari Storch, Co-Chair



Registrant Name Artemis Strategies Client Name Hansen Government Relations

**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 FOO - Food Industry (Safety, Labeling, etc.) (one per page)

16. Specific lobbying issues

*Add page to continue specific issues description for this issue*

Food Labeling

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

House  
Senate

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for t*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Ari	Storch		
Tim	Powers		

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

*Add a page for a list*

Printed Name and Title Ari Storch, Co-Chair

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LD-2DS (REV. 4/03)



Page 2

Registrant Name Artemis Strategies Client Name Hansen Government Relations

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

20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

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

First Name

Last Name

Suffix

First Name

Last Name

Su

1

3

2

4

**ISSUE UPDATE**

Find the code to select below.

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

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State Country
	Address	City
	C/S/Z	State Country

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

1

2

3

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Street Address	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ow per elic
	City	State/Province Country	City		
			State Country		

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

1

3

5

2

4

6

Add a page for more

