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LOBBYING REGISTRATION

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 _____

REGISTRANT

3. Registrant name Van Heuvelen Strategies, LLC

Address 4504 Middleton Ln

City Bethesda State MD Zip 20814

4. Principal place of business (if different from line 3)

City Washington, D.C. State/Zip (or Country) 20001

5. Telephone number and contact name

Bob Van Heuvelen 202-384-2400 Contact E-mail (optional) _____

6. General description of registrant's business or activities

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.* Self

7. Client name Genworth Financial, Inc.

Address 6620 West Broad St

City Richmond State VA Zip 23230

8. Principal place of business (if different from line 7)

City _____ State/Zip (or Country) _____

9. General description of client's business or activities

Self employed public affairs consultant

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Robert Van Heuvelen</u>	<u>Chief of Staff, Senator Con</u>

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Form LD-1 (Rev. 04/03)

Registrant Name _____ Client Name _____

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p

BAN INS FIN HCR MMM RET TAX _____

12. Specific lobbying issues (current and anticipated)

long term health care, tax reform, taxation of life insurance

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

- No ⇨ Go to line 14. Yes ⇩ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes the lobbying activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

- No ⇨ Sign and date the registration. Yes ⇩ Complete the rest of this section for each matching the criteria above, then sign and date registration.

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

R. L. ...

R. L. ...

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Signature Robert van Heuvelen Date October 27, 20

Printed Name and Title ROBERT VAN HEUVELEN

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