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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

1. Effective Date of Registration 12/1/2006

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Organization Elmendorf Strategies, LLC

Address 1455 Pennsylvania Avenue, NW, Suite 400

City Washington State DC Zip 20036 Country US

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

City _____ State _____ Zip _____

5. Telephone number and contact name Prefix Full Name

202-737-1010 Contact Ms. Jackie Whisman E-mail jackie@elmendorfstrategies.com

6. General description of registrant's business or activities

Government Relations

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

7. Client name The Hartford Financial Services Group

Address 1101 Connecticut Avenue, NW, Suite 400

City Washington State DC Zip 20036 Country US

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

City Hartford State CT Zip 06115 Country US

9. General description of client's business or activities

Insurance Company

LOBBYISTS

Go to page 3 to add more

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 of first becoming a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

First	Name Last	Suffix	Covered Official Position (if applicable)
Steven	Elmendorf		
Kristina	Kennedy		Legislative Director, Senator Paul Sarbanes
Shanti	Stanton		

0000013488

Registrant Name Elmendorf Strategies, LLC

Client Name The Hartford Financial Services Group

LOBBYING ISSUES INS - Insurance

Go to page 3 to add more lobbying

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

12. Specific lobbying issues (current and anticipated)

General Insurance Industry Issues

AFFILIATED ORGANIZATIONS

Go to page 3 to add more organ

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in 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 i criteria above, then proceed to line 14.

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

FOREIGN ENTITIES

Go to page 3 to add more foreign

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 acti 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 lobbying activity?

No ⇒ Sign and date the registration.

Yes ⇒ Complete the rest of this section for each entity matching the criteria above, then sign and date t registration.

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

Form Cor

Printed Name and Title Steven Elmendorf, President

1000013488

Registrant Name Elmendorf Strategies, LLC

Client Name The Hartford Financial Services Group

ADDITIONAL LOBBYISTS

Return to page 2 to finish t

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

First	Name Last	Suffix	Covered Official Position (if applicable)

ADDITIONAL LOBBYING ISSUES

Return to page 2 to finish t

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

INS - Insurance

AFFILIATED ORGANIZATIONS

Return to page 2 to finish t

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, number 13.

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

ADDITIONAL FOREIGN ENTITIES

Return to page 2 to finish t

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

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

Add an additional supplementary information

Printed Name and Title Steven Elmendorf, President

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