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LOBBYING REPORT

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

1. Registrant Name The Hartford Financial Services Group			
2. Address <input type="checkbox"/> Check if different than previously reported 1101 Connecticut Avenue #401, Washington DC 20036			
3. Principal Place of Business (if different from line 2) Hartford, Connecticut City: _____ State/zip (or Country) _____			
4. Contact Name Eric Thompson	Telephone (202) 296-7513	E-mail (optional) ethompson@thehartford.com	5. Senate ID # 17682-12
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 30500000

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

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 Lobbyi

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">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 type="checkbox"/> ⇔ \$ _____ 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">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 checked="" type="checkbox"/> ⇔ \$ <u>1,300,000.00</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Eric Thompson

Signature _____ Date _____

Printed Name and Title Eric Thompson -- Vice President, Federal Affairs

LD-2 (REV. 4/03)

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Registrant Name The Hartford Financial Services Group Client Name _____

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

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

16. Specific lobbying issues

ASBESTOS INJURY CLAIMS COMPENSATION REFORM — including S.1125 and variations of trust fund approach

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

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
CAIN, DAVID	N/A
DONOVAN, LAURA	N/A
FREEDMAN, JOEL	N/A
THOMPSON, ERIC	N/A

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

Signature _____ Date _____

Printed Name and Title _____

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Registrant Name The Hartford Financial Services Group Client Name _____

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

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

16. Specific lobbying issues

MUTUAL FUND GOVERNANCE -- including legislation to revise the regulation of mutual funds.

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

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
DONOVAN, LAURA	N/A
THOMPSON, ERIC	N/A

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

Signature _____ Date _____

Printed Name and Title _____

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Registrant Name The Hartford Financial Services Group Client Name _____

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

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

16. Specific lobbying issues

OPTIONAL FEDERAL INSURANCE CHARTER, TERRORISM REINSURANCE, FEDERAL FLOOD INSURANCE PROGRAM EXTENSION, INSURANCE REGULATION REFORM

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

U.S. House of Representatives
U.S. Senate
U.S. Department of Treasury
Federal Emergency Management Agency

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

Name	Covered Official Position (if applicable)
DONOVAN, LAURA	N/A
THOMPSON, ERIC	N/A

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

Signature _____ Date _____

Printed Name and Title _____

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Registrant Name The Hartford Financial Services Group Client Name _____

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

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

16. Specific lobbying issues

PENSION REFORM LEGISLATION & RETIREMENT SAVINGS INCENTIVES – including legislation to encourage consumers to choose guaranteed lifetime annuity income payments

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

U.S. House of Representatives
U.S. Senate
U.S. Department of Treasury

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

Name	Covered Official Position (if applicable)
DONOVAN, LAURA	N/A
THOMPSON, ERIC	N/A

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

Signature _____ Date _____

Printed Name and Title _____

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Registrant Name The Hartford Financial Services Group Client Name _____

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

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

16. Specific lobbying issues

TAX REFORM LEGISLATION, PENSION REFORM LEGISLATION, RETIREMENT SAVINGS INCENTIVES, TAX TREATMENT OF LIFE INSURANCE COMPANIES AND PRODUCTS, LIFE/NON-LIFE TAX CONSOLIDATION

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

U.S. House of Representatives
U.S. Senate
U.S. Department of Treasury

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

Name	Covered Official Position (if applicable)
DONOVAN, LAURA	N/A
THOMPSON, ERIC	N/A

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

Signature _____ Date _____

Printed Name and Title _____

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Registrant Name The Hartford Financial Services Group Client Name _____

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

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

16. Specific lobbying issues

CLASS ACTION REFORM — including S. 274 and potential amendments

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

U.S. House of Representatives
U.S. Senate
The White House

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

Name	Covered Official Position (if applicable)
DONOVAN, LAURA	N/A
RABITEAU, MARSHA	N/A
THOMPSON, ERIC	N/A

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

Signature _____ Date _____

Printed Name and Title _____

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