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LOBBYING REPORT

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

1. Registrant Name Van Scoyoc Associates, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 101 Constitution Avenue, NW, Suite 600 West			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC			
4. Contact Name Pete Evich	Telephone (202) 638-1950	E-mail (optional)	5. Senate ID # 39837-
7. Client Name <input type="checkbox"/> Self American Herbal Products Association			6. House ID # 32802

TYPE OF REPORT 8. Year 2005 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

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 checked="" type="checkbox"/> ⇒ \$ <u>20,000.00</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">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 type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature _____

Printed Name and Title Pete Evich, Associate Vice President

LD-2 (REV. 6/98)

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Registrant Name Van Scoyoc Associates, Inc. Client Name American Herbal Products Association

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the re 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 CSP (one per page)

16. Specific lobbying issues

Monitor legislation pertaining to dietary supplement issues.

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

U.S. House of Representatives
United States Senate

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

Name	Covered Official Position (if applicable)
Pete Evich	
H. Stewart Van Scoyoc	

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

Signature _____ Date 8/12/2005

Printed Name and Title Pete Evich, Associate Vice President

Form LD-2 (Rev. 6/98)

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Registrant Name Van Scoyoc Associates, Inc. Client Name American Herbal Products Association

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 HCR (one per page)

16. Specific lobbying issues

Monitor legislation pertaining to dietary supplement issues.

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

U.S. House of Representatives
United States Senate

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

Name	Covered Official Position (if applicable)
Pete Evich	
H. Stewart Van Scoyoc	

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

Signature *Pete Evich* Date 8/12/2005

Printed Name and Title Pete Evich, Associate Vice President

Form LD-2 (Rev.6/98)

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