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LOBBYING REPORT

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

1. Registrant name

Organization: Capitol Associates, Inc.

2. Address ☐ Check if different than previously reported

426 C Street NE

City: Washington State: DC Zip Code: 20002 Country: USA

3. Principal place of business (if different than line 2)

City State Zip Code Country

City State/Zip or Country

4a. Contact Name (Prefix Full Name) b. Telephone number c. E-mail

Ms. Debra M. Hardy Ha 202-544-1880 dh@capitolassociates.com

5. Senate ID # 8101-366

7. Client Name ☐ Self

National Association of Rural Health Clinics

6. House ID # 30813010

0000036891118

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June30) ☒ OR Year End (July 1-December 3

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 Activi

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than $10,000 ☐

$10,000 or more ☒ ⇨ $ 60,000

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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting p were:

Less than $10,000 ☐

$10,000 or more ☐ ⇨ $ _____

14. REPORTING METHOD. Check box to indicate expens accounting method. See instructions for description of option

☐ **Method A.** Reporting amounts using LDA definitions only

☐ **Method B.** Reporting amounts under section 6033(b)(8) o Internal Revenue Code

☐ **Method C.** Reporting amounts under section 162(e) of the Revenue Code

Form Com

Printed Name and Title Debra M. Hardy Havens, President

8/9/05

LD-2DS (Rev. 4/03)

Registrant Name Capitol Associates, Inc. Client Name National Association of Rural Health C

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the r 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 MMM - Medicare/Medicaid (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue >

Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2006
S. 4 - Healthy America Act of 2005
Legislation dealing with "safety net" providers
Legislation dealing with rural health issues
Legislation dealing with rural health clinic reimbursement

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

House
Senate
Center for Medicare and Medicaid Services

G9G03G119

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

Name			Covered Official Position (if applicable)
First Name	Last Name	Suffix	
William	Finerfrock		
Daniel	Price		

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

Add a page for a differen

Printed Name and Title Debra M. Hardy Havens, President