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LOBBYING REPORT

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

1. Registrant Name Capitol Decisions, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 101 Constitution Avenue, NW, Suite 675 East			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC			
4. Contact Name Carol A. McDaid	Telephone (202) 638-1950	E-mail (optional) cmcdaid@capitoldecisions.com	5. Senate ID # 55165
7. Client Name <input type="checkbox"/> Self Partnership for Recovery Coalition			6. House ID # 35118

TYPE OF REPORT 8. Year 2003 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 checked="" 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 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 Carol A. McDaid, Principal

LD-2 (REV. 6/98)

P

Registrant Name Capitol Decisions, Inc. Client Name Partnership for Recovery Coalition

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

16. Specific lobbying issues

H.R.2256/S.1138, Help Expand Access to Recovery and Treatment (HEART) Act of 2003, Substance abuse parity.

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

U.S. House of Representatives
United States Senate
ONDCP
NIAAA
NIDA
SAMHSA, CSAT, CSAP

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

Name	Covered Official Position (if applicable)
Carol A. McDaid	
Gwen O'Brien	

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

Signature _____ Date 2/14/2004

Registrant Name Capitol Decisions, Inc. Client Name Partnership for Recovery Coalition

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant 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

H.R.2256/S.1138, Help Expand Access to Recovery and Treatment (HEART) Act of 2003, Substance abuse parity.

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

U.S. House of Representatives
United States Senate
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Name	Covered Official Position (if applicable)
Carol A. McDaid	
Gwen O'Brien	

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

Signature Carol McDaid

Date 2/14/2004

