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Washington, DC 20515

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Office of Public Records
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Washington, DC 20510

RECEIVED
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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers are Required to Complete This Page 01 AUG -

1. Registrant Name Capitol Associates, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 426 C Street, NE, Washington, DC 20002			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Debra M. Hardy Havens		Telephone (202) 544-1880	E-mail (optional) dh@capitolassociates.com
5. Senate ID # 8101-975			
7. Client Name Fishers Island Ferry District		<input type="checkbox"/> Self	6. House ID # 3081 3095

TYPE OF REPORT 8. Year 2001 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 Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>40,000</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)
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).	14. REPORTING METHOD. Check box to indicate accounting method. See Instructions for description of
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature

Debra M. Hardy Havens

Printed Name and Title Debra M. Hardy Havens, CEO



Registrant Name Capitol Associates, Inc.

Client Name Fishers Island Ferry District

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

16. Specific lobbying issues

H.Con.Res.83, Establishing the congressional budget for the U.S. Government for fiscal year 2002, the congressional budget for the U.S. Government for fiscal year 2001, and setting forth appropriate budgetary levels for fiscal years 2003 and 2011.

S.Con.Res.20, A concurrent resolution setting forth the congressional budget for the U.S. government for 2002.

H.R.2299, Department of Transportation and Related Agencies Appropriations Act, 2002.

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

House

Senate

Department of Transportation

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

Name	Covered Official Position (if applicable)
Ronnie Tepp	

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

Signature _____

Printed Name and Title Debra M. Hardy Havens, CEO



Registrant Name Capitol Associates, Inc. Client Name Fishers Island Ferry District

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or Country)

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

Dan Wexler

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

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

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owners percent client

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant or affiliated organization

Signature _____ Date _____

Printed Name and Title Debra M. Hardy Havens, CEO

Form LD-2 (Rev. 6/98)

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