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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 Associates, Inc.

2. Address 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

Telephone

E-mail (optional)

5. Senate ID #

Debra M. Hardy Havens

(202) 544-1880

dh@capitolassociates.com

8101-1371

7. Client Name

Association of Schools of Allied Health Professions Self

6. House ID #
30813116

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 Activity

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 => \$ 20,000
Income (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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000

\$10,000 or more => \$ _____
Expenses (nearest \$20,000)

14. REPORTING METHOD. Check box to indicate accounting method. See Instructions for description of

Method A. Reporting amounts using LDA definition

Method B. Reporting amounts under section 6033 the Internal Revenue Code

Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature

Debra M. Hardy Havens

Printed Name and Title Debra M. Hardy Havens, CEO

Registrant Name Capitol Associates, Inc.

Client Name Association of Schools of Allied Health

000270344

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

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

16. Specific lobbying issues

- Allied Health Reinvestment Act (not introduced)
- Allied Health Education Issues

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

Check if None

- House
- Senate

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

| Name | Covered Official Position (if applicable) |
|------------------------|---|
| <u>Bill Finerfrock</u> | |
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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

