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## LOBBYING REPORT

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

02 AUG 11 PM 2:50

1. Registrant Name <b>Capitol Decisions, Inc.</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>101 Constitution Avenue, NW</b> Suite <b>675 East</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20001</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Carol A. McDaid</b>	Telephone <b>202-638-0326</b>	E-mail (optional) <b>cmcdaid@capitoldecisions.com</b>	5. Senate ID # <b>55165-532</b>
7. Client Name <input type="checkbox"/> Self <b>Memorial Hermann Children's Hospital</b>			6. House ID # <b>35118-035</b>

**TYPE OF REPORT** 8. Year 2002 Midyear (January 1-June 30)  OR Year End (July 1-Dec

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 Lobby

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this rep period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> >> \$ _____ 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).	<b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definit
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6032 the Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) Internal Revenue Code

Signature \_\_\_\_\_ Date 8/14/2002



Registrant Name: Capitol Decisions, Inc.

Client Name: Memorial Hermann Children's Hospital

**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**, provide information as requested. Attach additional page(s) as needed.

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

16. Specific Lobbying issues  
**Organ procurement and allocation issues.**

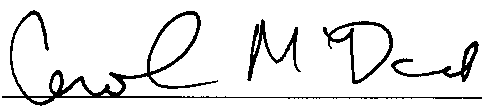
17. House(s) of Congress and Federal agencies contacted  Check if None

**House of Representatives  
 United States Senate  
 Centers for Medicare and Medicaid  
 Department of Health & Human Services  
 Executive Office of the President**

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

Name	Covered Official Position (if applicable)
<b>McDaid, Carol A.</b>	
<b>O'Brien, Gwen</b>	
<b>Van Scoyoc, H. Stewart</b>	

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

Signature 

Date 8/14/2002

