

Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

SECRETARY OF THE SENATE
03 JAN 30 AM 10:08

LOBBYING REPORT

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

1. Registrant Name Capitol Partners, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 601 Pennsylvania Avenue NW Suite 900			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20004			
4. Contact Name Jonathan Orloff	Telephone (202) 220-3181	E-mail (optional)	5. Senate ID # 700
7. Client Name <input type="checkbox"/> Self American Chiropractic Association			6. House ID # 3517E

TYPE OF REPORT 8. Year 2000 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

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more ⇒ \$ _____
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

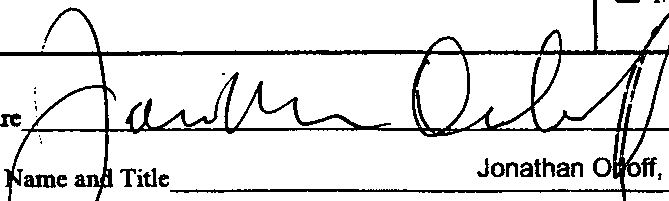
\$10,000 or more ⇒ \$ _____
Expenses (nearest \$20,000)

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 603: Internal Revenue Code

Method C. Reporting amounts under section 162 Internal Revenue Code

Signature 
Printed Name and Title Jonathan Orloff, Principal

Registrant Name Capitol Partners, Inc. Client Name American Chiropractic Association

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

16. Specific lobbying issues

Follow legislation relating to reimbursement/HHS.

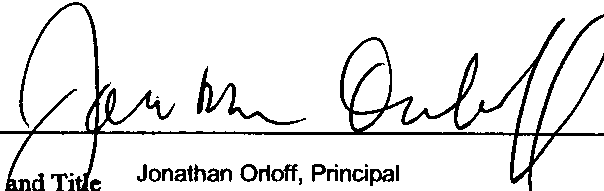
17. House(s) of Congress and Federal agencies contacted Check if None

House of Representatives.
Senate.

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

Name	Covered Official Position (if applicable)
Jonathan Orloff	
William Cunningham	

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

Signature  Date 1/7/03
Printed Name and Title Jonathan Orloff, Principal

