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# LOBBYING REPORT

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

1. Registrant name <b>Evergreen Associates, LTD</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>206 G Street NE</b> <b>Washington DC 20002 US</b>			
3. Principal place of business (if different than line 2) City _____ State/Zip or Country _____			
4a. Contact Name <b>Mr. Robert Brooks</b>	b. Telephone number <b>(202) 543-3383</b>	c. E-mail <b>evergreen@evergreendc.com</b>	5. Senate ID # <b>13984</b>
7. Client Name <input type="checkbox"/> Self <b>Community Health Assn of Spokane</b>			6. House ID # <b>3029201</b>

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December)

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 Act

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

<p align="center"><b>12. Lobbying Firms</b></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"/> ⇨ \$ _____</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"><b>13. Organizations</b></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"/> ⇨ \$ _____</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate appropriate accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions of</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Internal Revenue Code</p>
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Edit >

Signature  Date 2-10-05

Printed Name and Title Robert M. Brooks President



Registrant Name Evergreen Associates, LTD

Client Name Community Health Assn of Spokane

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

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

16. Specific lobbying issues

Health Care

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

Senate  
House of Representative  
Department of Defense

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

Name		Covered Official Position (if applicable)
Robert	Brooks	N/A
Paul	Grove	N/A

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

Signature  Date 2-18-05

Printed Name and Title Robert M. Brooks President



Registrant Name Evergreen Associates, LTD

Client Name Community Health Assn of Spokane

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

20. Client new address

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

City State/Zip

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

Kate Eckhart

Jared Frost

**ISSUE UPDATE**

24. General lobbying issues that no longer pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

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

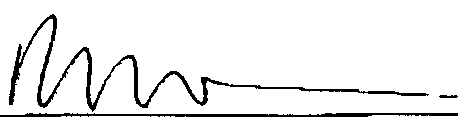
26. Name of each previously reported organization that is no longer affiliated with the registrant or client

**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	Own per cent

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

Signature 

Date 2-10-05

Printed Name and Title Robert M. Brooks President

