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

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| Lobbying Disclosure Act of 199 | • | YING REPORT • Required to Complete This P | age , |
|---|---------------------------------------|---|--------------------------|
| Registrant Name Capitol Associates, Inc. | | | ∳ € ∉ |
| 2. Address | ent than previously reported DC 20002 | | |
| 3. Principal Place of Business (if City: | | Zip (or Country) | · [· |
| 4. Contact Name | Telephone | E-mail (optional) | 5. Senate ID # |
| Debra M. Hardy Havens | (202) 544-1880 | dh@capitolassociates.com | 8101 - 1270 |
| 7. Client Name National Alliance for Autism Research | □ Self | | 6. House ID # 3081- 3112 |
| 10. Check if this is a Termination INCOME OR EXPEN | | | bbying Activity |
| 12. Lobbyir | ng Firms | 13. Organi | zations |
| INCOME relating to lobbying activities for this reporting period was: | | EXPENSES relating to lobbying activities for this r period were: | |
| Less than \$10,000 □ | | Less than \$10,000 🗆 | |
| \$10,000 or more □ ⇒ \$ | 60,000 Income (nearest \$20,000) | \$10,000 or more ☐ ⇒ \$ Expense | s (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 | | 14. REPORTING METHOD. Check box to indicate accounting method. See Instructions for description | |
| activities on behalf of the client). | And only to toelying | Method A. Reporting amounts | s using LDA defini |
| | | Method B. Reporting amount the Internal Reven | |
| | | Method C. Reporting amoun Internal Revenue | |

Signature House House House Filing #88aab3cf-c883-412e-bed0-e8a52a27a8a5 - Page 1 of 8

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| Printed Name and Title Debra M. Hardy Havens, President | |
| Form LD-2 (Rev. 06/98) | P.A |

| Registrant Name Capitol Associates, Inc. | Client Name | National Alliance for Autism Resear |
|---|--|---|
| LOBBYING ACTIVITY. Select as many codes as ne engaged in lobbying on behalf of the client during the rinformation as requested. Attach additional page(s) as a | eporting period | ect the general issue areas in which Using a separate page for each of |
| 15. General issue area code <u>BUD</u> (one per page) | | |
| 16. Specific lobbying issues | | |
| HR 5320/S 2766 - Making appropriations for the Depart HJ Res 111 - Making continuing appropriations for the HJ Res 112 - Making further continuing appropriations HJ Res 122 - Making further continuing appropriations HJ Res 123 - Making further continuing appropriations HJ Res 124 - Making further continuing appropriations | fiscal year 200 for the fiscal y for the fiscal y for the fiscal y | rear 2003, and for other purposes. The rear 2003, and for other purposes. The rear 2003, and for other purposes. The rear 2003, and for other purposes. |
| 17. House(s) of Congress and Federal agencies contact | ed | ☐ Check if None |
| House Senate Department of HHS | | |
| 18. Name of each individual who acted as a lobbyist in | Ť. | |
| Name | | Covered Official Position (if applicable) |
| Edward Long PhD, Senior VP, Congressional Relati | ions | |
| Roxanne Burnham, Associate | | |
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| | 1400 | |
| | 1 | |
| 19. Interest of each foreign entity in the specific issues | s listed on line | 16 above 🛛 Check if None |
| | | |
| SignatureFiling #88aab3cf-c883-412e-bed0-e8a | -F2-27-0-F Dog | - 2 - 4 0 |

Filing #88aab3cf-c883-412e-bed0-e8a52a27a8a5 - Page 3 of 8

| Printed Name and Title | Debra M. Hardy Havens, | President | | | |
|------------------------|------------------------|-----------|-------|----|-------------|
| Form LD-2 (Rev. 06/98) | | | PAGE_ | 2_ | of <u>4</u> |

| Registrant Name Capitol Associates, Inc. | Client Name | National Alliance for Autism Resea |
|--|-------------------|---|
| LOBBYING ACTIVITY. Select as many codes as neengaged in lobbying on behalf of the client during the information as requested. Attach additional page(s) as | reporting period | ct the general issue areas in which the control of |
| 15. General issue area code HOM (one per page) | | |
| 16. Specific lobbying issues | | |
| H.R. 3448 - Bioterrorism Preparedness Act of 2001 | | |
| H.R. 5005 - Homeland Security Act of 2002 | | |
| 17. House(s) of Congress and Federal agencies contac | ted | ☐ Check if None |
| House Senate Department of HHS | | |
| 18. Name of each individual who acted as a lobbyist i | n this issue area | |
| Name | | Covered Official Position (if applicable) |
| Edward Long PhD, Senior VP, Congressional Related | tions | |
| Roxanne Burnham, Associate | | |
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| 19. Interest of each foreign entity in the specific issue | es listed on line | 16 above 🛛 Check if None |
| | | |
| | | |
| Signature | | |
| | | |
| Printed Name and Title Debra M. Hardy Havens, Presi | iueni | |

PAGE <u>3</u> of <u>4</u>

| Registrant Name Capitol | Associates, Inc. | Client Name Nation | al Alliance for Autism Research |
|--|--------------------------------|---|--|
| Information Update | Page - Complete ONL | Y where registration informati | on has changed. |
| 20. Client new address | | | · · · · · · · · · · · · · · · · · · · |
| 21. Client new principal place | e of husiness (if different fr | rom line 20) | <u></u> } |
| · | c or business (ii different ti | State/Zip (or Country) | + |
| City | | ************************************** | h |
| 22. New general description | of client's business or activ | ities | |
| | | | |
| LOBBYIST UPDATE | | | |
| | | who is no longer expected to ac | t as a lobbyist for the client |
| Ronnie Tepp | | | |
| Romne Tepp | | | |
| ISSUE UPDATE | | | |
| 24. General lobbying issue | s previously reported that | t no longer pertain | |
| | GOV | | |
| A DOLL YATED ODGAN | | | |
| AFFILIATED ORGAN 25. Add the following affil | | | |
| | | | D : 1 DI CD |
| Name | | Address | Principal Place of Bu (city and state or cou |
| | | | |
| | | | |
| | | | |
| 26. Name of each previous | ly reported organization | that is no longer affiliated with | n the registrant or client |
| | | | |
| FOREIGN ENTITIES | | | |
| 27. Add the following fore | ign entities | | <u> </u> |
| Name | Address | Principal place of business (city and state or country) | Amount of contribution Own for lobbying activities perce |
| | | | clien |
| | ···· | | |
| | | | |
| 1 | I | l | l l |

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

| Signature | Date | |
|--------------------------|----------------------------------|---------------------------|
| Printed Name and Title _ | Debra M. Hardy Havens, President | |
| Form LD-2 (Rev. 6/98) | | Page <u>3</u> of <u>4</u> |