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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 <input type="checkbox"/> 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 Debra M. Hardy Havens	Telephone (202) 544-1880	E-mail (optional) dh@capitolassociates.com	5. Senate ID # 8101-862
7. Client Name American Society of Radiologic Technologists	<input type="checkbox"/> Self	6. House ID # 30813084	

**TYPE OF REPORT** 8. Year 2001 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	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:  Less than \$10,000 <input type="checkbox"/>  \$10,000 or more <input type="checkbox"/> ⇒ \$ <u>40,000</u> 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).	<b>EXPENSES</b> relating to lobbying activities for this reporting period were:  Less than \$10,000 <input type="checkbox"/>  \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)  <b>14. REPORTING METHOD.</b> Check box to indicate reporting accounting method. See Instructions for description of  <input type="checkbox"/> Method A. Reporting amounts using LDA definition  <input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code  <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature

*Debra M. Hardy Havens*

Printed Name and Title Debra M. Hardy Havens, CEO



Registrant Name Capitol Associates, Inc.

Client Name American Society of Radiologic

**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 code area as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.R.1011, Consumer Assurance of Radiologic Excellence Act

Legislation establishing minimum federal standards for the performance of radiologic procedures and radiation therapy

S.548, Assure Access to Mammography Act of 2001

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

☐ Check if None

House

Senate

Center for Medicare and Medicaid Services

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

Name	Covered Official Position (if applicable)
William A. Finerfrock, Vice President	
Matthew Williams, Associate	

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

