

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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03 AUG 25 P1

## LOBBYING REPORT

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

1. Registrant Name <b>Capitol City Group, Ltd.</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>601 Pennsylvania Avenue, NW, Suite 900, South Bldg.</b>			
3. Principal Place of Business (if different from line 2) <b>Washington</b> <b>DC 20004</b> City: State/zip (or Country)			
4. Contact Name <b>Gerald T. Harrington</b>	Telephone <b>(202) 434-8211</b>	E-mail (optional) <b>gharrington@capitolcitygrp.com</b>	5. Senate ID # <b>52903-315</b>
7. Client Name <input type="checkbox"/> Self <b>Rehabilitation Hospital of Rhode Island</b>			6. House ID # <b>34919015</b>

**TYPE OF REPORT** 8. Year 2003 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

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 type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000.00</u> Income (nearest \$20,000)</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"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate exp accounting method. See instructions for description of opt</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(t) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) Internal Revenue Code</p>

Printed Name and Title

Gerald T. Harrington, President

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PAGE 1 of

Registrant Name Capitol City Group, Ltd. Client Name Rehabilitation Hospital of Rhode Island

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

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

16. Specific lobbying issues

IRF hospital issues

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)
Gerald T. Harrington	
Christopher P. Vitale	

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

Signature Gerald T. Harrington Date 8/13/03

Printed Name and Title Gerald J. Harrington, President

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Form LD-2 (Rev. 4/03)

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