

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

05 AUG 18 AM 11:27

LOBBYING REPORT

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

1. Registrant name
Organization **Evergreen Associates, Ltd**

2. Address Check if different than previously reported
206 G Street NE
City **Washington** State **DC** Zip Code **20002** Country **US**

3. Principal place of business (if different than line 2)
City _____ State _____ Zip Code _____ Country _____

4a. Contact Name Prefix **Mr.** Full Name **Robert Brooks** b. Telephone number **(202) 543-3383** c. E-mail **evergreen@evergreendc.com**

5. Senate ID # **13084-21**

7. Client Name Self **Community Health Assn of Spokane**

6. House ID # **3029201**

TYPE OF REPORT 8. Year **2005** 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

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more ⇨ \$ _____

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 ⇨ \$ _____

14. REPORTING METHOD. Check box to indicate exact accounting method. See instructions for description of option

Method A. Reporting amounts using LDA definitions on Internal Revenue Code

Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code

Method C. Reporting amounts under section 162(e) of the Revenue Code

Robert Brooks 8/12/05

Printed Name and Title **Robert Brooks, President**

0000421830

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 Representatives
Department of Defense

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

Name			Covered Official Position (if applicable)
First Name	Last Name	Suffix	
Robert	Brooks		
Paul	Grove		
David	Kuennen		

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

Printed Name and Title Robert Brooks, President

0000421831



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

Address _____

City _____ State _____ Zip Code _____ Country _____

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

City _____ State _____ Zip Code _____ Country _____

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

1	First Name	Last Name	Suffix	3	First Name	Last Name	Suffix
1	_____	_____	_____	3	_____	_____	_____
2	_____	_____	_____	4	_____	_____	_____

ISSUE UPDATE

24. General lobbying issues that no longer pertain

Find the code to select below.

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
_____	Address _____ City _____ State _____ Country _____	City _____ State _____ Country _____
_____	Address _____ City _____ State _____ Country _____	City _____ State _____ Country _____

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

1 _____ 2 _____ 3 _____

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address City	Address State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Own percent
_____	_____	_____	City _____ State _____ Country _____	_____	_____

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

1 _____ 3 _____ 5 _____
2 _____ 4 _____ 6 _____

Printed Name and Title Robert Brooks, President

0000421832

