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### LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers are Required to Complete This Form FEB 12 PM 1

1. Registrant Name Capitol Associates, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 426 C Street, N.E., Washington, D.C. 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. Sena 8101-10
7. Client Name <input type="checkbox"/> Self Susquehanna Health System			6. Hou 308131C

**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 checked="" 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 accounting method. See Instructions for description of methods.  <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

[REDACTED]

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

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

16. Specific lobbying issues

H.R. 3061 / S. 1536 Making appropriations for the Departments of Labor, Health and Human Services, and Education, and Related Agencies; Title II - secure support for health and human services program.

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

☐ Check if None

House

Senate

Department of Health and Human Services

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

Name	Covered Official Position (if applicable)
Edward Long, V.P., Congressional Relations	
Julie Pawelczyk, Vice President	

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

