

GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
WASHINGTON, D.C. 20001

Year 2013

Non-Profit For-Profit

ORIGINAL

LOBBYIST REGISTRATION FORM

(See next page for instructions)

AMENDMENT

Filing Fee Enclosed \$250.00
 \$50.00

1. (a) Registrant's Name Carmen Group Inc. (b) Daytime Phone Number 202 785 0500
(c) Permanent Address 1899 Pennsylvania Ave., NW 4th Floor Washington, DC 20006
(Street Address) (City, State, Zip Code)
(d) Temporary Address (while lobbying) _____
(Street Address) (City, State, Zip Code)
(e) E-Mail Address millerm@carmengroup.com

2. Lobbyist(s) Working for Registrant: List the full name of each in-house person employed and each individual retained by you to lobby on your behalf. If you do not employ an in-house person or retain an individual to lobby, state non-applicable.

- (a) Name David Carmen (b) Name Dal Harper
Address same as above Address same as above
(Street Address) (Street Address)
(City, State, Zip Code) (City, State, Zip Code)

- Daytime Phone Number _____ Daytime Phone Number _____
 If more space is needed, check box and attach OCF Supplemental Sheet.

3. Person Compensating Registrant: List the full name of each client with whom you have an agreement for compensation to provide lobbying services. If you do not contract to provide lobbying services, state non-applicable.

- (a) Name Quorum Health Resources (b) Daytime Phone Number 615-371-4860
(c) Address 105 Continental Place Brentwood, TN 37027
(Street Address) (City, State, Zip Code)
(d) Nature of Business Healthcare

4. Terms of Compensation: (a) Hourly (b) until terminated
(Salary) (Duration of Employment)

- If more space is needed, check box and attach OCF Supplemental Sheet.

5. Identify each matter by subject and formal designation on which the lobbyist/registrant expects to lobby. Attach a Supplemental Sheet if additional space is needed.

Hospital related issues

I, the undersigned, declare under oath and on penalty of perjury that the statements contained in this Lobbyist Registration Form are, to the best of my knowledge, true, correct, and complete.



Signature of Registrant (or, if not an individual, an authorized officer or agent* of registrant must sign)

*The lobbyist retained by contract to provide lobbying services may not sign on behalf of the compensating registrant.

Subscribed and sworn to before me on this 15 day of February, 2013.

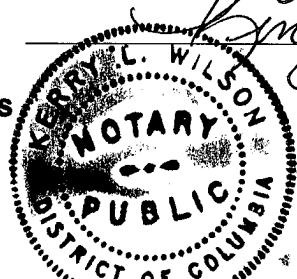
Washington, DC

Kerry L. Wilson
Notary Public

My Commission Expires My Commission Expires
May 31, 2014

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Rev. 12/2012



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