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 06 SEP 26 AM1

LOBBYING REGISTRATION	
Lobbying Disclosure Act of 1995 (Section 4)	9 16 6
Check if this is an Amended Registration 1. Effect	ive Date of Registration
2. House Identification Number Soul Senate Id	lentification Number 7557.9—
REGISTRANT 3. Registrant name 5, M, BURKMM	+ ASSOCIATES
Address 1530 KEY BLUC) 、 井1222 を
City ARLINGTOR	State VN Zip 222(
4. Principal place of business (if different from line 3) City	State/Zip (or Country)
5. Telephone number and contact name (7) 07 - 524 - 3209 Contact	RUNKI E-mail (optional)
6. General description of registrant's business or activities LORS VING	UCTING FI
CLIENT A Lobbying firm is required to file a separate registration for each clien	nt. Organizations employing in-house lobbyists should cl
7. Client name COTTA VAVE	PRODUCTS
Addres 2710 TNo	MAS AVE
CITYCHEYENNE	StateWV Zip 8200
8. Principal place of business (if different from line 7) City	State/Zip (or Country)
9. General description of client's business or activities	LECTRONICS -
LOBBYISTS 10. Name of each individual who has acted or is expected to act as a lobb this section has served as a "covered executive branch official" or acting as a lobbyist for the client, state the executive and/or legislate.	byist for the client identified on line 7. If any percentage of the covered legislative branch official within two
Name VICK MOA	Covered Official Position (if applic
JACIC "S"ICIDAN	

Form LD-I (Rev. 06/98)	

Registrant Name		Client N	ame	
LOBBYING ISSU		applicable codes lis	ted in instructions and on	the reverse side of Form LD-
12. Specific lobbying issue		•	10.	CELL
MARKET		. •	(AF A)	
PHONE		JARGÉI	2 To	non +
AFFILIATED ORG 13. Is there an entity other a semiannual period a No ⇒ Go to li	r than the client and in whole or	that contributes r in major part plan	s, supervises or contro	ne lobbying activities of the ils the registrant's lobbying f this section for each entit then proceed to line 14.
Name		A	ddress	Principal Place of Bu (city and state or co
FOREIGN ENTIT	IES			
a) holds at least b) directly or in activities of c) is an affiliat	ntity that: st 20% equitable ndirectly, in wh f the client or an	ole or in major pa ny organization ide	rt, plans, supervises, c entified on line 13; or	ation identified on line 13; ontrols, directs, finances or and has a direct interest in
No ⇔ Sign and d	ate the registrat	ion.		he rest of this section for e he criteria above, then sign n.
Name	Ad	ldress	Principal place of business (city and state or cour	contribution for
	1			

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Printed Name and Title JACIC BUNKMAN, PRKS

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