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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration 5-27-

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name

J. M. BURKMAN AND ASSOC

Address

1530 KEY BLVD; #1222

City

ARLINGTON

State

VA

Zip

2220

4. Principal place of business (if different from line 3)

City _____

State/Zip (or Country) _____

5. Telephone number and contact name

703 524-3209

Contact

JACK BURKMAN E-mail (optional) JBURKMAN@P

6. General description of registrant's business or activities

LOBBYING AND CONSULTING FIRM

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should labeled "Self" and proceed to line 10.* Self

7. Client name

HOLLAND AND KNIGHT, LLP

Address

2099 PENNSYLVANIA AVE, N.W. #

City

WASHINGTON

State

DC

Zip

20006

8. Principal place of business (if different from line 7)

City _____

State/Zip (or Country) _____

General description of client's business or activities

LAW FIRM

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any this section has served as a "covered executive branch official" or "covered legislative branch official" within the executive or legislative branch, acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if appl)
<u>JACK BURKMAN</u>	

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Registrant Name J. M. BURKMAN + ASSOC Client Name HOLLAND & KNIGHT

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD.

HOUSING BAN

12. Specific lobbying issues (current and anticipated)

(1.) LOBBYING THE DEPT. OF HUD REGARDING AND MORTGAGE FEE ISSUES.

(2.) LOBBYING THE WHITE HOUSE RE: MORTGAGE IMPAI

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying

No -> Go to line 14.

Yes -> Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)
<u>FIDELITY NATIONAL FINANCIAL (FNF)</u>	<u>4050 CALLE REAL SUITE 220 SANTA BARBARA, CA 93110</u>	<u>SANTA BARBARA</u>

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13;
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in of the lobbying activity?

No -> Sign and date the registration.

Yes -> Complete the rest of this section for matching the criteria above, then sign registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature

[Handwritten Signature]

Date

6/17/0

Printed Name and Title

JACK BURKMAN

PRESIDENT

