

Clerk of the House of Representatives	Secretary of the Senate
Legislative Resource Center	Office of Public Records
B-106 Cannon Building	232 Hart Building
Washington, DC 20515	Washington, DC 20510

SECRET
07 FEB

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration

2-10-

2. House Identification Number 36049

Senate Identification Number

75570-

REGISTRANT

3. Registrant name

J.M. BURKMAN & ASSOCIATES

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)

6. General description of registrant's business or activities

LOBBYING + CONSULTING FIRM

CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check

labeled "Self" and proceed to line 10. Self

7. Client name

BACTERIN, INC.

Address

600 CRUISER LANE

City

BELGRADE

State

MT

Zip

5971

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

City

State/Zip (or Country)

9. General description of client's business or activities

MEDICAL DEVICE COMPANY

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 pers this section has served as a "covered executive branch official" or "covered legislative branch official" within two y 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 applicabl)
JACK BURKMAN	

000031485

00

Form LD-1 (Rev. 06/98)

Registrant Name J. N. Client Name _____

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, pag

HCR

12. Specific lobbying issues (current and anticipated)

LOBBYING + MARKETING THE COMPANY TO DNS + DC

AFFILIATED ORGANIZATIONS

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

No ⇒ Go to line 14. Yes ↓ Complete the rest of this section for each entity ma the criteria above, then proceed to line 14.

Name	Address	Principal Place of Busines (city and state or countr

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; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or su 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 the of the lobbying activity?

No ⇒ Sign and date the registration. Yes ↓ Complete the rest of this section for each matching the criteria above, then sign ar registration.

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

Signature [Signature] Date 2-11-0

0000031486

13

Printed Name and Title

JACK SUFKINMAN

Form LD-1 (Rev. 06/98)