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 SENATE

06 JUL 28 PM 2: 37

LOBBYING REGISTRATION					
Lobbying Disclosure Act of 1995 (Section 4)	$\sim$ $\langle a \rangle$				
Check if this is an Amended Registration	1. Effective Date of Registration				
2. House Identification Number 360497	Senate Identification Number 15570 —				
REGISTRANT  3. Registrant name , , , , SURILMA	N \$ ASSOCIATES				
Address 1500 KFY BLVOD	1 H 1222				
City ARZINGTOR	State VA Zip 2-30				
4. Principal place of business (if different from line 3)  City	State/Zip (or Country)				
5. Telephone number and contact name  (703-32+320 Contact	DACIC BUTK MAN (optional)				
6. General description of registrant's business or activities	TONSULTING FIRM				
CLIENT A Lobbying firm is required to file a separate registrate	ion for each client. Organizations employing in-house lobbyists should check				
7. Client name Self	E SEAL				
Address 801 Non 7+1	CASUFCC AVENUE				
City SOUTH PORT	State NC Zip 2846				
8. Principal place of business (if different from line 7)  City	State/Zip (or Country)				
9. General description of client's business or activities  COMPAN	6 FINANCIAL DAT				
this section has served as a "covered executive branc	to act as a lobbyist for the client identified on line 7. If any persect official" or "covered legislative branch official" within two y and/or legislative position(s) in which the person served.				
Name Name	Covered Official Position (if applicab				

C)		
	Form LD-1 (Rev. 06/98)	l

egistrant Name	Client N	ame ) RUZ	
LOBBYING ISSUES 11. General lobbying issue areas.	Select all applicable codes lis	ted in instructions and on the rev	erse side of Form LD-1, pa
12. Specific lobbying issues (curred)	ent and anticipated)	MGRRSS + Bor	+ 0H
CE: IMM	16RATION	+ Bor	OER 15
AFFILIATED ORGAN  13. Is there an entity other than a semiannual period and in	the client that contributes whole or in major part pla	ns, supervises or controls the	registratit s 1000 ymg 200
No ⇒ Go to line 14.	Ye	s I Complete the rest of this the criteria above, then p	section for each entity ma proceed to line 14.
Name		Address	Principal Place of Busines (city and state or countr
			, in the second sec
b) directly or indire	that: % equitable ownership in tectly, in whole or in major	he client or any organization part, plans, supervises, control identified on line 13; <b>Or</b> ion identified on line 13 and l	ois, directs, finances of se
of the lobbying a	activity?	☐ Yes I Complete the re	
Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
Signature 2	±23fbf26f-ab62-4826-953d-50	Dat	e 6-0

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Printed Name and Title

Form LD-1 (Rev. 06/98)

DECK BURRIAN, PROZ