Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

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Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 SECRETERY
07FE8-6

## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)	1 16 6
Check if this is an Amended Registration	1. Effective Date of Registration
2. House Identification Number 36049-	_Senate Identification Number
REGISTRANT 3. Registrant name  3. My	KMANIJ ASSOCIA
Address 1530 (E)	13CVD ( ) # 1222
City ARCINGTORY	State X Zip 2200
4. Principal place of business (if different from line 3)  City	State/Zip (or Country)
5. Telephone number and contact name  Contact	NCIC BUNKMAN E-mail (optional)
6. General description of registrant's business or activities	CONSULTING FIRT
CLIENT A Lobbying firm is required to file a separate registration	on for each client. Organizations employing in-house lobbyists should chec
labeled "Self" and proceed to line 10. Self  7. Client name	.   C
Address 1424 GWEN	ZELL AVE.
City DELRAY BEAC	H State 1-1 Zip 37444
8. Principal place of business (if different from line 7)  City	State/Zip (or Country)
3. General description of client's business or activities いっしつ - To- ORのだり	MAKPINE SNOP BU
LOBBYISTS	,
this section has served as a "covered executive branch	o act as a lobbyist for the client identified on line 7. If any per in official" or "covered legislative branch official" within two yad/or legislative position(s) in which the person served.
Name	Covered Official Position (if application)
JUCK BANKENOW	



Form LD-1 (Rev. 06/08))

LOBB	YING ISSUES			d - the -over	on side of Form I D-1 mag	
11. Gene	ral lobbying issue areas	. Select all applica	able codes listed in instruct	ons and on the rever	se side of Form LD-1, pag	
	OF L					
12. Spec	ific lobbying issues (cur	rrent and anticipate	ed) TNÉ	COMPA	NIT	
	PROMOT	9116	110C			
	001	<u> </u>	t 01	15_		
AFFIL	IATED ORGAI	NIZATIONS	contributes more than \$1	10.000 to the lobby	ring activities of the regi	
13. Is the	ere an entity official miannual period and i	in whole or in ma	ajor part plans, supervise	s or controls the re	egistrant's lobbying acti	
	No ⇔ Go to line 1	4.	Yes I Complet the crite	e the rest of this se ria above, then pro-	ction for each entity ma	
-/-	Name		Address		Principal Place of Busines (city and state or country	
			<u> </u>			
	EIGN ENTITIES there any foreign entit		•			
17. 15 6	•	•	1 1 1 1 1 1 4	a-comination is	lestified on line 13: Of	
	<ul><li>a) holds at least 2</li><li>b) directly or indi</li></ul>	0% equitable ow rectly, in whole	mership in the client of a control of the control o	supervises, control	dentified on line 13; <b>or</b> s, directs, finances or s	
	activities of th	e client or any o	rganization identified or	n line 13; OT	as a direct interest in the	
	c) is an affiliate of the lobbying	t the client of an activity?	ly organization identifie	u on me to and m		
	/ No⇔ Sign and date	the registration	. Q Yes	Complete the res	st of this section for eac	
	140 - Origin and date the regionation			matching the criteria above, then sign a registration.		
	Name	Addre	ess Pri	ncipal place of business	Amount of contribution for	
		·	(city ar	nd state or country)	lobbying activities	
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M						

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Printed Name and Title SPCIL USVILLTIAN, UCL

Form LD-I (Rev. 06/98)