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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name <i>Joann Payne Payne, Sr. Associates</i>	
2. Address <input checked="" type="checkbox"/> Check if different than previously reported <i>3000 South Randolph Street #226</i>	
3. Principal Place of Business (if different from line 2) City: <i>Arlington</i> State/Zip (for Country): <i>Va. 22206</i>	
4. Contact Name <i>Joann Payne</i>	5. Senate ID # <i>30941241</i>
Telephone <i>703-845-8009</i>	E-mail (optional) <i>JoPayne9517@AOL.com</i>
7. Client Name <input checked="" type="checkbox"/> Self <i>P.K. Contracting Inc</i>	6. House ID # <i>33238002</i>

TYPE OF REPORT 8. Year Midyear (January 1-June 30) OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report
 10. Check if this is a Termination Report → Termination Date _____ 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> → \$ _____ Income (nearest \$20,000)	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> → \$ _____ Expenses (nearest \$20,000)
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(h)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature *Joann Payne*
 Printed Name and Title *Joann Payne*
 LD-1 (REV. 6/98) PAGE 1 OF 1

Registrant Name Joann Payne Client Name P.K. Contracting Inc.

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address:
21. Client new principal place of business (if different from line 20):
City _____ State/Zip (or Country) _____
22. New general description of client's business or activities _____

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

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

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant, client or affiliated organization

Signature Joann Payne Date 10/20/2008
Printed Name and Title Joann Payne, President