

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

07 FEB -6

LOBBYING REPORT

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

1. Registrant Name J.M. BURKMAN & ASSOCIATES			
2. Address <input type="checkbox"/> Check if different than previously reported 1530 KEY ISLAND, #1222, ARLINGTON			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country): _____			
4. Contact Name JACK BURKMAN	Telephone -703-524-3209	E-mail (optional)	5. Senate ID # 75570-
7. Client Name <input type="checkbox"/> Self IDENTIFID, INC.	6. House ID # 36049-C		

TYPE OF REPORT 8. Year 2006 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 Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more **\$40,000**
Income (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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000

\$10,000 or more ⇔ \$ _____ Expenses (nearest \$20,000)

14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of accounting method.

Method A. Reporting amounts using LDA definition

Method B. Reporting amounts under section 6033(c) Internal Revenue Code

Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature: [Signature]
Name and Title: JACK BURKMAN, PRES

0000021245



Printed Name and Title _____

LD-2 (REV. 6/98)

PA

Att Name J. M. Burk Client Name IDENTIFIED

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code DEF (one per page)

16. Specific lobbying issues
MARKETING IDENTITY
CONFIRMATION SERVICES TO
FEDERAL GOVERNMENT

17. House(s) of Congress and Federal agencies contacted Check if None
HOUSE, SENATE, DNS, DOT,
DOT, AND WHITE HOUSE

18. Name of each individual who acted as a lobbyist in this issue area

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

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature [Signature] Date 1-3-08
Printed Name and Title JACK BURKMAN, PRES.

0000021246

