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Clerk of the House of Representatives  
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Washington, DC 20515

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Washington, DC 20510

# LOBBYING REPORT

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

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

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-De

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 Lobbyi

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center"><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> <b>\$ 20,000</b> Income (nearest \$20,000)</p> <p>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):</p>	<p align="center"><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this r period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$2</p> <p><b>14. REPORTING METHOD.</b> Check box to indic accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defi</p> <p><input checked="" type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature

Printed Name and Title

JACIL BURIKMAN, PRESIDENT

LD-2 (REV. 6/98)

Registrant Name J. M. BURKMAN Client Name E-MERGE

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

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

16. Specific lobbying issues

MARKETING IT SERVICE  
TO THE FEDERAL GOVT

17. House(s) of Congress and Federal agencies contacted  Check if None

HOUSE, SENATE, HUD  
DEPT. OF HOMELAND SECURITY, I

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

Name	Covered Official Position (if applicable)
JACK BURKMAN	

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

Signature [Signature] Date 1-2-

Printed Name and Title JACK BUSYKMAN, PRESIDENT

Form LD-2 (Rev. 6/98)

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