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LOBBYING REPORT

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

1. Registrant Name <u>Karen L. Thurman</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>9067 SW 190th Ave Rd Dunnellon, FL 34432</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>Karen L. Thurman</u>		Telephone <u>352-697-3400</u>	E-mail (optional) <u>Karen.Sh@aol.com</u>
5. Senate ID <u>28429</u>			6. House ID <u>36873</u>
7. Client Name <input type="checkbox"/> Self <u>e- Appeals</u>			

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) OR Year End (July 1-I

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</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 type="checkbox"/> ⇒ \$ <u>60,000</u> 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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature

Karen L. Thurman

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Printed Name and Title *Naren L. Therman*

PAGE 02

THURMAN FOR CONGRESS

352-344-1661

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Registrant Name _____ Client Name _____

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 co information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues
Educate Congress ^(US House) and the Senate on the advantages of the automated system

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

House, Senate and Veterans Administration

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

Name	Covered Official Position (if applicable)
<i>Karen L. Thurman</i>	<i>former member of Congre</i>

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

Signature *Karen L. Thurman* Date *11/02/05*

Printed Name and Title *Karen Thurman*

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