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

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

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 Lobbyin

## 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"/> ⇨ \$ <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 align="center"><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this re period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20</p> <p><b>14. REPORTING METHOD.</b> Check box to indica accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defir</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6f Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>
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Signature \_\_\_\_\_

Printed Name and Title

JACK SUZKMAN, TKS

LD-2 (REV. 6/98)

Registrant Name J.M. BURKMAN Client Name HOLLAND & KAI

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 HOU (one per page)

16. Specific lobbying issues

LOBBYING RE; TITLE 1  
MORTGAGE INSURANCE ISSUES. LOBB.  
ALSO RE; BUSINESS INTEREST CNE

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

HOUSE, SENATE, +  
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

[Handwritten Signature]

Date

1/2/06

Printed Name and Title JAMES SUICKEN, JR. TRUSTEE

Form LD-2 (Rev. 6/98)

Page

Registrant Name J. M. BURKMAN

Client Name HOLLAND & KN

**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, information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

LOBBYING RE; RESPA  
LOBBYING RE; GSE REFORM LEGIS

17. House(s) of Congress and Federal agencies contacted

Check if None

HOUSE, SENATE, HUD, OM  
TREASURY + 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 1/2/05  
JACK BURKMAN PRESIDENT

Printed Name and Title J. N. C. J. N. C. J. N. C.

Form LD-2 (Rev. 6/98)

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