

House of Representatives  
Resource Center  
Cannon Building  
Washington, DC 20515

Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, DC 20510

SECRETARY OF  
05 JUL -8

# LOBBYING REPORT

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

|  |                                  |                   |                                |
|--|----------------------------------|-------------------|--------------------------------|
| 1. Registrant Name<br><u>J. M. BURKMAN &amp; ASSOCIATE</u>   |                                  |                   |                                |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br><u>1530 KEY BLVD; #1222; ARLING</u> |                                  |                   |                                |
| 3. Principal Place of Business (if different from line 2)<br>City: _____ State/Zip (or Country) _____                  |                                  |                   |                                |
| 4. Contact Name<br><u>JACK BURKMAN</u>   | Telephone<br><u>703-524-3209</u> | E-mail (optional) | 5. Senate ID #<br><u>75570</u> |
| 7. Client Name <input type="checkbox"/> Self<br><u>HOLLAND &amp; KNIGHT, LLP</u>                                       |                                  |                   | 6. House ID #<br><u>36049-</u> |

TYPE OF REPORT 8. Year 2005 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><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><br/>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><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____<br/>Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p> |

Signature [Handwritten Signature]  
Printed Name and Title JACK BURKMAN, PRESIDENT



Name J. M. Burke

Client Name HOLLAND + KN

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 H00 (one per page)

16. Specific lobbying issues

TITLE AND MORTGAGE  
INSURANCE ISSUES. ALSO, BUSIN  
INTEREST CHECKING BILL

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

HOUSE, SENATE + WHITE H

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

| Name         | Covered Official Position (if applicable) |
|--------------|---|
| JACK BURKMAN |   |
|              |   |
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|              |   |
|              |   |
|              |   |
|              |   |
|              |   |

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

Signature [Signature] Date 7-3-0  
Printed Name and Title JACK BURKMAN, PRES



Client Name J. M. BURK Client Name HOLLAND + KN

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the rep 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

GSE REFORM LEGISLA

ALSO, RESPA ISSUE,

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

Check if None

HOUSE, SENATE, HUD,

WHITE HOUSE + OFNEO

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

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

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature

[Signature]  
JACK BURKMAN

Date

7-3-0  
PRO

Printed Name and Title \_\_\_\_\_

Form LD-2 (Rev. 6/98)