

House of Representatives Secretary of the Senate
 Legislative Resource Center Office of Public Records
 Cannon Building 232 Hart Building
 Washington, DC 20515 Washington, DC 20510

SECRETARY OF THE
 06 JUL 28 PM

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 Check if different than previously reported
1530 KEY BLVD; #1222; ARLINGTON, VA

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 #: 75570-2

6. House ID #: _____

7. Client Name Self
AMERICA'S HEROES OF FREEDOM 36049

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 ⇒ \$ _____
 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 accounting method. See instructions for description of

Method A. Reporting amounts using LDA definition

Method B. Reporting amounts under section 6033 Internal Revenue Code

Method C. Reporting amounts under section 162 Internal Revenue Code

0000171004

Signature: [Handwritten Signature]

Filing #b55b36a4-1a77-44d9-87f6-d0aa27d05012 - Page 1 of 4



Signature _____

Printed Name and Title _____

JACK (SULLIVAN), III

P:

LD-2 (REV. 6/98)

Name J.M. BURK Client Name AMERICA'S

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
LOBBYING FOR FEDERAL APPROPRIATIONS AND ON VARIOUS ISSUES OF TROOP CARE.

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

HOUSE + SENATE

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 7-3-06
PRC

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Ⓢ

Printed Name and Title DAVID J. SULLIVAN, VP

Form LD-2 (Rev. 6/98)

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