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SECRETARY OF
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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 REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 1-10-1
 2. House Identification Number 36049 Senate Identification Number 75570

REGISTRANT

3. Registrant name J. M. BURKMAN AND ASS
 Address 1630 KEY BLVD #1222
 City ARLINGTON VA State VA Zip 22201
 4. Principal place of business (if different from line 3)
 City _____ State/Zip (or Country) _____
 5. Telephone number and contact name
703-524-3209 Contact JACK BURKMAN E-mail (optional) _____
 6. General description of registrant's business or activities
LOBBYING & CONSULTING FIRM

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should c*

7. Client name SHARP DECISIONS Self
labeled "Self" and proceed to line 10.
 Address 55 W. 39th Street
 City NY State NY Zip 10018
 8. Principal place of business (if different from line 7)
 City _____ State/Zip (or Country) _____

9. General description of client's business or activities
TECHNOLOGY COMPANY SERVING THE FED

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any of this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

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

Form LD-1 (Rev. 06/98)

Registrant Name J. M. BURKMAN FASS Client Name SINARIP

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form ED-1
GOV

12. Specific lobbying issues (current and anticipated)

PROMOTING THE COMPANY AS
IT COMPANY IN VARIOUS AGENCIES AND

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying

No ⇒ Go to line 14. Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or cot

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13;
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in of the lobbying activity?

No ⇒ Sign and date the registration. Yes ↓ Complete the rest of this section for e matching the criteria above, then sign registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Date 1-10-08

Signature

Printed Name and Title

JACK BURKMAN, PRES

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