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LOBBYING REPORT

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

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------|----------------------------------|
| 1. Registrant Name Hyjek & Fix, Inc. | | | |
| 2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 2100 Pennsylvania Ave. NW Suite 560 City Washington State/Zip (or Country) DC 20037 | | | |
| 3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____ | | | |
| 4. Contact Name Donald J. Fix | Telephone _____ | E-mail (optional) _____ | 5. Senate ID # _____ |
| 7. Client Name <input type="checkbox"/> Self The Alliance of Jefferson County | | | 6. House ID # 30484035 |

TYPE OF REPORT 8. Year 2004 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 Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

| 12. Lobbying Firms | 13. Organizations |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| INCOME relating to lobbying activities for this reporting period was: | EXPENSES relating to lobbying activities for this reporting period were: |
| Less than \$10,000 <input type="checkbox"/> | Less than \$10,000 <input type="checkbox"/> |
| \$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$20,000.00</u> Income (nearest \$20,000) | \$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (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). | 14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of method. |
| | <input type="checkbox"/> Method A. Reporting amounts using LDA definition |
| | <input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code |
| | <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code |

Signature

R R D/L

Filing #bc7ed643-dabe-465b-baf4-14d92438fab6 - Page 1 of 4

Date 2/10/2005

Registrant Name: Hyjek & Fix, Inc.

Client Name: The Alliance of Jefferson County

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

H.R.4200, National Defense Authorization Act for Fiscal Year 2005, Updates and monitoring of BRAC 200
H.R.4613, Department of Defense Appropriations Act, 2005, Updates and monitoring of BRAC 2005 Proce

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

Check if None


Department of Defense
House of Representatives
Senate

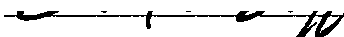
18. Name of each individual who acted as a lobbyist in this issue area

| Name | Covered Official Position (if applicable) |
|-----------------------|-------------------------------------------|
| Fix, Donald J. | |
| Goode, Chris | |
| Hyjek, Steven | |
| Stegenga, Karl | |
| | |
| | |
| | |
| | |

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

Check if None

Signature 

Signature  _____ Date _____

Printed Name and Title **Brian Schaffner - Executive Assistant** _____ Pa