

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

SECRETARY OF THE SENATE

04 AUG 24 AM 11:00

**LOBBYING REPORT**

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

1. Registrant Name <b>Saliba Action Strategies, LLC</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>101 Constitution Avenue, N.W.</b> Suite <b>800</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20001</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Khalil Saliba</b> Telephone <b>202/721-9134</b> E-mail (optional) _____			5. Senate ID # <b>57533-90</b>
7. Client Name <input type="checkbox"/> Self <b>National Franchisee Association, inc.</b>			6. House ID # <b>35236005</b>

**TYPE OF REPORT** 8. Year <sup>2004</sup> ~~2003~~ Midyear (January 1-June 30)  OR Year End (July 1-D

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

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ Income (nearest \$20,000)	<b>EXPENSES</b> relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$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).	<b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition <input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6 of the Internal Revenue Code <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 1 of the Internal Revenue Code

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title **Khalil Saliba -** \_\_\_\_\_

Registrant Name: Saliba Action Strategies, LLC

Client Name: National Franchisee Association, inc.

**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 LBR (one per page)

16. Specific Lobbying issues

**S 1428, To prohibit civil liability actions from being brought or continued against food manufacturers, mar distributors, advertisers, sellers, and trade associations for damages or injunctive relief for claims of injury from a person's weight ga,**

**S 20, To amend the Fair Labor Standards Act of 1938 to provide for an increase in the Federal minimum w**

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

Check if None

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

Name	Covered Official Position (if applicable)
<b>Saliba, Khalil</b>	

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

Check if None

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title **Khalil Saliba -** \_\_\_\_\_ P

Registrant Name: Saliba Action Strategies, LLC

Client Name: National Franchisee Association, inc.

**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 TAX (one per page)

16. Specific Lobbying issues  
**HR 571, S973, To amend the Internal Revenue Code of 1986 to provide a shorter recovery period for the de certain restaurant buildings., depreciation on restaurant buildings**

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

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

Name	Covered Official Position (if applicable)
<b>Smith, Carl M.</b>	

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title **Khalil Saliba -** \_\_\_\_\_ I

Registrant Name: Saliba Action Strategies, LLC

Client Name: National Franchisee Association, inc.

**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 TOR (one per page)

16. Specific Lobbying issues

**HR 339, To prevent frivolous lawsuits against the manufacturers, distributors, or sellers of food or non-alc beverage products that comply with applicable statutory and regulatory requirements. , prohibiting lawsuits against restaurant companies**

**S 1428, To prohibit civil liability actions from being brought or continued against food manufacturers, mar distributors, advertisers, sellers, and trade associations for damages or injunctive relief for claims of injury from a person's weight ga, legal reform**

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

Check if None

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

Name	Covered Official Position (if applicable)
<b>Saliba, Khalil</b>	

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

Check if None



Signature *Khalil Saliba* Date         

Printed Name and Title **Khalil Saliba -**