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LOBBYING REPORT

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

1. Registrant Name Valis Associates			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1700 Pennsylvania Avenue, NW #950 City Washington State/Zip (or Country) DC 20006 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Sharon Spillare	Telephone 202-393-5055	E-mail (optional) wvalis@valisassociates.com	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Conti Enterprises, Inc.			6. House ID # 31959038

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) **OR** Year End (July 1-De

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report >> Termination Date 8/30/2004 11. No Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> >> \$ _____ 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>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"/> >> \$ _____ Expenses (nearest \$)</p> <p>14. REPORTING METHOD. 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 6011 of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature

Filing #3440d448-d7a0-470c-b1a5-aadafc0f35df - Page 1 of 8

Date **2/13/2005**

Printed Name and Title Sharon Spillare - Office Manager Pg

Registrant Name: Valis Associates

Client Name: Conti Enterprises, 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 ENV (one per page)

16. Specific Lobbying issues

Lobbying for continued small business environmental clean-up contracts through the Army Corps of Engineers.

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

Check if None

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

Name	Covered Official Position (if applicable)
Conti, Jennifer	
Franks, Robert	
Schulze, Richard	
Valis, Wayne	

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

Check if None

Signature _____ Date _____

Printed Name and Title **Sharon Spillare - Office Manager** _____ P:

Registrant Name: Valis AssociatesClient Name: Conti Enterprises, Inc.**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

One Cragwood Road, , South Plainfield, NJ, 07080 USA

21. Client new principal place of business (if different from line 20)

City _____ State/Zip (or Country) _____

22. New general description of client's business or activities

LOBBYIST UPDATE23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client
Franks, Robert**ISSUE UPDATE**24. General lobbying issues previously reported that **no longer** pertain**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or co)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client**FOREIGN ENTITIES**

27. Add the following foreign entities

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

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization

Signature

Date 2/13/2005

Printed Name and Title **Sharon Spillare - Office Manager**

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4. Contact Name Sharon Spillare	Telephone 202-393-5055	E-mail (optional) wvalis@valisassociates.com	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Symbolic Systems, Inc.			6. House ID # 31959040

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Signature

Sharon Spillare

Date **2/13/2005**

Signature _____

Printed Name and Title **Sharon Spillare - Office Manager** _____ P