

07 DEC 11 PM 3  
**LOBBYING REPC**

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

<b>1. Registrant Name</b> <input checked="" type="checkbox"/> Organization <input type="checkbox"/> Individual	
SEDERHOLM PUBLIC AFFAIRS, INC.	
<b>2. Address</b> <input type="checkbox"/> Check if different than previously reported	
Address1	675 N. WASHINGTON STREET, #410
Address2	
City	ALEXANDRIA
State	VA
Zip Code	22314 -
<b>3. Principal place of business (if different than line 2)</b>	
City	
State	
Zip Code	-
<b>4a. Contact Name</b>	
Ms. PAMELA SEDERHOLM	
<b>b. Telephone Number</b>	
<input type="checkbox"/> International Number	
(703) 548-8621	
<b>c. E-mail</b>	
pamela@sederholmpa.com	
<b>5. Sen</b>	6261
<b>7. Client Name</b> <input type="checkbox"/> Self	
WENDY'S INTERNATIONAL, INC.	
<b>6. Hou</b>	3545

**TYPE OF REPORT** 8. Year 2007 Midyear (January 1-June 30) ☒ Year End (July 1-Dec)

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 Activ \_\_\_\_\_

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

<b>12. Lobbying</b>	<b>13. Organizations</b>
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSE</b> relating to lobbying activities for this r were:
<u>Less than \$10,000</u> <input checked="" type="checkbox"/>	<u>Less than \$10,000</u> <input type="checkbox"/>
<u>\$10,000 or more</u> <input type="checkbox"/> \$ _____	<u>\$10,000 or more</u> <input type="checkbox"/> \$ _____
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</b> Check box to indicate accounting method. See instructions for descriptio
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(i) Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(c) Revenue Code

Signature ☒ Digitally Signed By: Pamela Sederholm Date 08/0  
U.S. DST Accs Unaffiliated Individual, Pamela Sederholm

Printed Name and Title Pamela Sederholm, President



**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 Labor Issues/Antitrust/Workplace (one per page)

16. Specific lobbying issues

Minimum Wage  
Food Consumption Responsibility Act

17. House(s) of Congress and Federal agencies ☐ 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)
First	Last	Suffix	
Pamela	Sederholm		

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

File

Page

Year

Page

Page

Page

Page

Page

Page

Page

Page

Page

Page

Page

Page

Printed Name and Title Pamela Sederholm, President



**Information Update Page - Complete ONLY where registration information has changed.****20. Client new address**

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_ Co

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_ Co

**22. New General description of client's business or activities****LOBBYIST UPDATE****23. Name of each previously reported individual who is no longer expect to act as a lobbyist for the client**

1	2	3	4
First Name	Last Name	Suffix	Client Name

**ISSUE UPDATE****24. General lobbying issue that no longer pertain**

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**AFFILIATED ORGANIZATIONS****25. Add the following affiliated organization(s)**

Name	Address			Principal Place of Business (city and state or country)
	Street Address City	State/Province Zip	Country	

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

1	2	3
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**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
	Street Address City	State/Province	Country		

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

1	2	3	4	5	6
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Printed Name and Title **Pamela Soderholm, President**

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