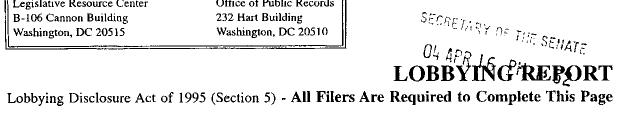
Clerk of the House of Representatives Legislative Resource Center

Secretary of the Senate Office of Public Records



1. Registrant Name			
White & Case LLP			
2. Address	nt than previously reported		***************************************
601 13the Street, N.W., S	Suite 600 South		
3. Principal Place of Business (if differe	nt from line 2)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••••••••••••••••••••••••••••••••••••••
Washington	DC 2		
City: 4. Contact Name	State/zip Telephone	(or Country) E-mail (optional)	5. Senate ID #
Linda E. Carlisle	(202) 626-3600	lcarlisle@whitecase.com	3. Seliate 15 #
7. Client Name			6. House ID # 30959016
TYPE OF REPORT 9. Check if this filing amends a			ar End (July 1-Dece
10. Check if this is a Terminatio	·	<u>-</u>	11. No Lobbying
INCOME OR EXPE	NSES - Complete Eithe	er Line 12 OR Line 13	
12. Lobbyi	ng Firms	13. Organiz	zations
INCOME relating to lobbying period was:	activities for this reporting	EXPENSES relating to lobbying acti period were:	vities for this report
Less than \$10,000 🗹		Less than \$10,000 🗖	
\$10,000 or more 🚨 🖒 \$_	Income (nearest \$20,000)	\$10,000 or more	(penses (nearest \$20,000)
Provide a good faith estimate, re of all lobbying related income payments to the registrant by activities on behalf of the client	nded to the nearest \$20,000, om the client (including all		k box to indicate exp for description of op using LDA definitio
		Internal Revenue Companies Amounts Internal Revenue	under section 162(e)
Signature Filing #6	a419c92-e432-4452-bc4a-e2e	Date 02/26/ 586dc6180 - Page 1 of 4	04

Dintal No and Title	Linda E. Carlisle, Partner	
Printed Name and Title		
LD-2 (REV. 4/03)		PAGE 1 of .

tegistrant Name	White & Case LLP	Client Name	AHOLD USA, INC
*	date Page - Complete ON	ILY where registration info	rmation has changed.
20. Client new address			
21. Client new principal	place of business (if different from l		
City	s' f l' _e' kuinaa ar artiritae	State/Zip (or Country)	***************************************
22. New general descript	tion of client's business or activites	•	
LOBBYIST UPD. 23. Name of each pr	ATE reviously reported individual	who is no longer expected to	o act as a lobbyist for the client
ISSUE UPDATE 24. General lobbyin	ng issues previously reported t	that no longer pertain	
::	RGANIZATIONS ng affiliated organization(s)		
25. Add the following	RGANIZATIONS ng affiliated organization(s) ume	Address	Principal Place of Bu (city and state or cou
25. Add the following	ng affiliated organization(s)	Address	Principal Place of Bu (city and state or cou
25. Add the following Na	ng affiliated organization(s) me previously reported organization		(city and state or cou
25. Add the following Na Na 26. Name of each p	ng affiliated organization(s) me previously reported organization		(city and state or cou
25. Add the following Na	ng affiliated organization(s) me previously reported organization		(city and state or could be st

Signature _

___ Date -

Form LD-2 (Rev. 4/03)

Page ___3___