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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration March 1, 2013

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name KRAFT FOODS, INC.

Address 101 CONSTITUTION AVE., NW, SUITE 400 WEST

City WASHINGTON State DC Zip 20001

4. Principal place of business (if different from line 3)

City NORTHELD State/Zip (or Country) ILLINOIS

5. Telephone number and contact name

(202) 354-1598 Contact BRIAN FOLKERTS E-mail (optional) _____

6. General description of registrant's business or activities

FOOD AND BEVERAGE COMPANY

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box below and proceed to line 10.* Self

7. Client name _____

Address _____

City _____ State _____ Zip _____

8. Principal place of business (if different from line 7)

City _____ State/Zip (or Country) _____

9. General description of client's business or activities _____

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>BRIAN FOLKERTS</u>	
<u>LINDA "TUCKIE" WESTFALL</u>	
<u>KENNETH J. ROBERTS</u>	<u>Assoc. Administrator, Foreign Service, U.S. Dept. of Agric</u>

3000023235

Form LD-1 (Rev. 06/98)

Registrant Name KRAFT FOODS, INC. Client Name _____

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

ADV AGR BEV BUD CDT FOO MAN TOR TRD
MIA TAX

12. Specific lobbying issues (current and anticipated)

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying :

- No ⇒ Go to line 14. Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus: (city and state or cou

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
 b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**
 c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in tl of the lobbying activity?

- No ⇒ Sign and date the registration. Yes ↓ Complete the rest of this section for ea matching the criteria above, then sign : registration.

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

Signature Brian [Signature] Date 2/12/07

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Printed Name and Title Brian Folkerts, Vice President - Gov't Affairs

Form LD-1 (Rev. 06/98)