



9/10/03

09-15-2003

Form PTO-1595 (Rev. 10/02)		REC		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office							
OMB No. 0651-0027 (exp. 6/30/2005)		102550321									
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1. Name of conveying party(ies): Steven P. Greiner Paul A. Cogley Keith E. Petrofsky  Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			2. Name and address of receiving party(ies) Name: <u>Kraft Foods Holdings, Inc.</u>  Internal Address: _____  Street Address: <u>Three Lakes Drive</u>  City: <u>Northfield</u> State: <u>IL</u> Zip: <u>60093</u>  Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____  Execution Date: <u>08/20/2003</u>											
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____ A. Patent Application No.(s) <u>29/182,269</u> B. Patent No.(s) _____  Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Raymond M. Mehler</u>  Internal Address: _____  Street Address: <u>200 W. Adams, Suite 2850</u>  City: <u>Chicago</u> State: <u>IL</u> Zip: <u>60606</u>			6. Total number of applications and patents involved: <input type="checkbox"/> 7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account  8. Deposit account number:  <u>50-1039</u>								
<b>DO NOT USE THIS SPACE</b>											
9. Signature.  <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Raymond M. Mehler, Reg. 26,306</td> <td style="width: 33%; border: none;"></td> <td style="width: 33%; border: none;">September 8, 2003</td> </tr> <tr> <td style="border: none;">Name of Person Signing</td> <td style="border: none;">Signature</td> <td style="border: none;">Date</td> </tr> </table>						Raymond M. Mehler, Reg. 26,306		September 8, 2003	Name of Person Signing	Signature	Date
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Name of Person Signing	Signature	Date									
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