



For California residents only:



I am currently a California resident (please check).

By signing below, I give permission for Abbott and its contracted third parties to use the information I am submitting to provide me with helpful information about **Diabetes and Nutritional Information** and to send me marketing materials and promotional offers about Abbott's products and services. Abbott will not sell or transfer my personal information to any other party for their marketing activities. This permission will apply for a period of ten years from the date of the signature below. You can receive a copy of this consent by contacting Abbott at (800) 986-8501.

Signature _____

Print Name _____

Address _____

Date _____

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Thank you! We look forward to bringing you helpful nutritional information to enable you to make informed lifestyle decisions!

To complete this form:

1. Print the PDF on your printer.
2. Check the California resident box.
3. Sign and date the form.
4. Crease the form on the indicated dotted lines.
5. Fold the signature panel under first.
6. Fold the instruction panel under second, covering the signature panel.
7. Seal the entire top edge with tape.
8. Place in the U.S. Mail. No postage required.

Seal the entire top edge with tape.