





# Abbott Animal Health 1Q 2010 Promotional Bites

Offers valid January 1 through March 31, 2010

**AlphaTRAK® Blood Glucose Monitoring System  
Meter EXCHANGE for NEW Customers!**  
Exchange your existing product for FREE AlphaTRAK products.

BUY		GET			
Step 1: Return your current meter and remaining test strips and get 1 vial of test strips FREE!					
Step 2: Purchase either of the options below for even more free product!		Meter (\$80 value)	Control Solution (\$12.75 value)	100 Lancets (\$15.25 value)	Vial Strips (\$50 value)
Option 1	Buy 3 Vials of AlphaTRAK Strips and Get*	X			
Option 2	Buy 5 Vials of AlphaTRAK Strips and Get**	X	X	X	

AlphaTRAK product promotions available to NEW AlphaTRAK system customers only. (Limit 2 offers per customer)  
\*Distributor ships these free goods. \*\*Abbott ships these free gifts. While supplies last. 50 test strips per vial, 1 box of lancets contains 100, 2 bottles of control solution per box.

**CliniCare® Canine/Feline Liquid Diet and CliniCare® RF Feline Liquid Diet**  
Buy 3 cans and get 1 can FREE!



No mixing on CliniCare Special. For more information contact your Abbott Animal Health Veterinary Practice Consultant or call Customer Service at 888-299-7416.



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December 2009  
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# AlphaTRAK<sup>®</sup> Blood Glucose Monitoring System Meter Exchange Customer Free Goods Form

Please include this form in your return envelope

Return your current product within 7 days  
of placing your order in the envelope provided.  
If you need an envelope call Abbott Customer Service  
to obtain return envelopes 888-299-7416.

Return your current meter and remaining strips and receive  
1 Vial of AlphaTRAK Test Strips FREE!

Abbott will ship your free test strips within 2 weeks of  
receiving returned product.

Information on this form may be used for promotional material from Abbott Animal Health. You can opt-out of receiving materials from Abbott at any time by calling 888-299-7416 or mailing to Abbott Animal Health, 200 Abbott Park Rd., Dept. AH12, Bldg J48, Abbott Park, IL 60064.

Indicate which promotion you have purchased:

- 3 Vials of AlphaTRAK Test Strips  
 5 Vials of AlphaTRAK Test Strips

PLEASE PRINT CLEARLY (all information is required)

Contact Name (first & last) \_\_\_\_\_

Name of Facility \_\_\_\_\_

Business Address \_\_\_\_\_ Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Distributor: \_\_\_\_\_

Distributor Rep. Name (first & last) \_\_\_\_\_

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