LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1335
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 12/06/06
REG-07
ck# 1223
$110.00
PRS
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ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

Instructions

- Print in ink or type.
- Complete form and return with $110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Barton (Last) Yvonne (First) G. (MI)

2. BUSINESS PHONE 512-986-5163 (Area Code and Phone Number)

3. BUSINESS ADDRESS 610 Cenizo Path (Street and No.) Cedar Park (City) TX (State) 78613 (Zip)

MAILING ADDRESS 610 Cenizo Path (Street and No.) Cedar Park (City) TX (State) 78613 (Zip)

4. EMPLOYER Abbott Laboratories, Inc.

5. EMPLOYER'S ADDRESS 100 Abbott Park Rd (Street and No.) Abbott Park (City) IL (State) 60064-6049 (Zip)

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Abbott Laboratories, Inc.

Address 100 Abbott Park Rd, Abbott Park, IL 60064-6049

Business or purpose pharmaceutical & medical device manufacturer

Does this person pay you? Yes

If No, who pays you? _____

Form 500, Rev. 10/2002

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2. Name _____

   Address _____

   Business or purpose _____

   Does this person pay you? _____

   If No, who pays you? _____

3. Name _____

   Address _____

   Business or purpose _____

   Does this person pay you? _____

   If No, who pays you? _____

4. Name _____

   Address _____

   Business or purpose _____

   Does this person pay you? _____

   If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

Form 500, Rev. 10/2002