

## Form ST3, Certificate of Exemption

Purchaser: Complete this certificate and give it to the seller.

<b>Seller:</b> If this certificate is not completed, you mo This is a blanket certificate, unless one of the bo	•		' '		the purchaser continues	
making purchases or until otherwise cancelled by the purchaser.  Check if this certificate is for a single purchase and enter the related invoice/purchase order # _				BLANKET CERTIFICATE SUPPORTING TAX EXEMPT		
If you are a contractor and have a purchasing cific job. Enter the exempt entity name and s		n an ex	empt organization, check the	box to ma	ake purchases for a spe-	
Exempt entity name		Proi	ect description			
Name of Purchaser						
ABBOTT LABORATORIES						
Business Address	City		State		ZIP code	
177 EAST COUNTY RD. B		. PAL	IL M	N	55117	
Purchaser's Tax ID Number						
2187227, 6944248, 5140010, 677564 f no tax ID number, FEIN	Driver's license num	MN her/State	e issued ID number			
Enter one of the following:	State of Issue	iber/stat	Number			
Name of seller from whom you are purchasing, leasing, or renting						
Seller's Address	City		State	7	ZIP code	
Type of Business						
01 Accommodation and food services		11	Transportation and wareh	ousing		
02 Agricultural, forestry, fishing, hunting		12	Utilities			
03 Construction		13	Wholesale trade			
04 Finance and insurance		14	Business services			
05 Information, publishing and communicat	ions	15	Professional services			
X 06 Manufacturing		16	Education and health-care	services		
07 Mining		17	Nonprofit organization			
08 Real estate		18	Government			
09 Rental and leasing		19	Not a business (explain)			
10 Retail trade		20	Other (explain)			
Reason for Exemption (See Instructions)						
A Federal government (department)		J	Agricultural production			
B Specific government exemption			Industrial production/manuf	facturing		
		L	Direct pay authorization			
C Tribal government (name)			Multiple points of use (servi	ces, digita	l goods, or computer	
D Foreign diplomat #		_	software delivered electroni	cally)		
E Charitable organization #		N	Direct mail			
F Educational organization #		0	Other (enter number from inst	ructions)		
G Religious organization #		P	Percentage exemption			
H Resale			Advertising (enter percentage	)	%	
Qualifying capital equipment (see instruction)	ons when		Utilities (enter percentage)		%	
equipment claimed is part of a construction pr			Electricity (enter percentage) _		%	
declare that the information on this certificate is c sales tax by using an exemption certificate for item. \$100 under Minnesota law for each transaction for	s or services that will b	e used	for purposes other than thos			
	rint Name Here		Title		Date	
KUNG I	_AURA VENCES		SR TAX TECHI	<u>VICIA</u> N	01/01/25	