

***Warranty is only valid for home use. Warranty is invalid for professional use.
Warranty is only valid for manufacturer's defects.**

Thank you for purchasing Microlife's Digital Peak Flow Meter with FEV1 for Spirometry. Please complete the information on this card and mail it to register your warranty. You may also register at www.microlifeusa.com

MODEL NO. (on bottom of monitor) _____

PURCHASE DATE _____

FIRST NAME _____ LAST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____ AGE _____

EMAIL _____

1. Is this PEF/FEV1 meter for you or did you receive it as a gift? _____

2. Why did you buy this particular PEF/FEV1 meter? In other words, what attracted you to this particular meter? (For example: Product features, Attractiveness of packaging, Price)

3. How did you learn about this product? _____

4. Is there anything we should change about the unit or the packaging of the unit? If yes, please describe. _____

5. Please check any of the following you are concerned about:

- | | | |
|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Blood Sugars | <input type="checkbox"/> Hearing |
| <input type="checkbox"/> Weight | <input type="checkbox"/> Arthritis | <input type="checkbox"/> Calories |
| <input type="checkbox"/> Body Fat | <input type="checkbox"/> Salt | <input type="checkbox"/> Blood Cell Count |
| <input type="checkbox"/> Cholesterol | <input type="checkbox"/> Pulse | <input type="checkbox"/> Stress |
| | | <input type="checkbox"/> Asthma |

6. What is your annual household income:

- | | | |
|---|---|--|
| <input type="checkbox"/> Less than \$40,000 | <input type="checkbox"/> \$40,000 to \$75,000 | <input type="checkbox"/> \$75,000 to \$100,000 |
| <input type="checkbox"/> \$100,000 to \$150,000 | <input type="checkbox"/> \$150,000 to \$200,000 | <input type="checkbox"/> Above \$200,000 |

7. At what store did you buy this PEF/FEV1 Meter? _____

CITY _____ STATE _____

8. What was the price of the unit? \$ _____

NOTE: Warranties are only valid if this card has been completed and mailed. Thank you.

PLACE
STAMP
HERE

Microlife USA, Inc.
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DUNEDIN, FL 34697-0125