SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits 	A. signature Adgent Address B. peceived by (Printed Name) C. Date of Delive 11-17-06
1. Article Addressed to: FIPCA-07-2006-0250	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Steven R. Spaulding Director, Regulatory Affairs Wellmark International 1501 East Woodfield Road, Suite 200 West Schaumburg, Illinois 60173	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7004 2510 000	36 9719 8D81