**ETJ0043 Third Party Administration of the State of Wisconsin Income Continuation Insurance Program**

**Instructions:**

1. List all Proposer’s Subcontractors, consultants and suppliers (including Proposer subsidiaries) that will provide services, products, content, work and supplies as part of the Services described in the Proposal being submitted.
2. Provide a list of all persons who contributed to authoring the Proposal.
3. Complete the Proposer information box.
4. Return this form per Section 2.5.1 of the RFP (TAB 1).
5. Add additional copies of this form as necessary.

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| **Name of Subcontractor/ Consultant/Supplier/Proposal Author** | **Address** | **Work/Service/Product/Content to be Performed/Supplied** |
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**Proposer Information:**

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| Proposer Company Name: | Click or tap here to enter text. |
| Name & Title of Authorized Representative: | Click or tap here to enter text. |