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| ETF_logo_large | STATE OF WISCONSIN **Department of Employee Trust Funds**  **Robert J. Conlin**  SECRETARY | 801 W Badger Road  PO Box 7931  Madison WI 53707-7931  1-877-533-5020 (toll free)  Fax (608) 267-4549  http://etf.wi.gov |

Date: January 17, 2017

To: All RFP ETG0013 Proposers

Subject: **ADDENDUM No. 3**

**Request for Proposal (RFP) ETG0013**

**Administrative Services for the State of Wisconsin Pharmacy Benefit Program**

**Acknowledgement of receipt of this Addendum No. 3:**

**Proposers must acknowledge receipt of this Addendum No. 3 by providing the required information in the box below and including this Page 1 in TAB 1 of Proposer’s Proposal.**

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| Proposer’s Company Name: |  |
|  |  |
| Authorized Printed Name: |  |
|  |  |
| Authorized Signature: |  |
|  | Date |

**Please note the following updates to RFP ETG0013:**

1. **ADD** the following bullet to Page 20 of the RFP, Section 2.4 to the right of TAB 1 directly proceeding “Provide the following in the following order:”

* Page 1 of ADDENDUM No. 3: Completed and signed Page 1 of Addendum No. 3.

1. **CHANGE** the Proposal Due Date in Section 1.9 Calendar of Events, of the RFP, to January 30, 2017 by 12:00PM CST.

**END**

This Addendum is available on ETF’s Extranet at <https://etfonline.wi.gov/etf/internet/RFP/PharBeneMgmt16RFP/index.htm>).