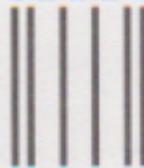


# Attachment G

Member Education Request Form - Postcard





NO POSTAGE  
NECESSARY IF  
MAILED IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 8 AUGUSTA ME

POSTAGE WILL BE PAID BY ADDRESSEE

BUREAU OF HEALTH  
MAINE DEPARTMENT OF HUMAN SERVICES  
11 STATE HOUSE STATION  
AUGUSTA ME 04330-9930

