

W A I V E R

SUPREME COURT OF THE UNITED STATES

No. 23-1185

In Re W.A. Griffin

(Petitioner)

Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.

v.

(Respondent)

I DO NOT INTEND TO FILE A RESPONSE to the petition for a writ of certiorari unless one is requested by the Court.

Please check the appropriate box:

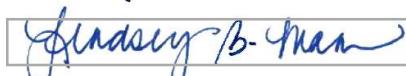
I am filing this waiver on behalf of all respondents.
 I only represent some respondents. I am filing this waiver on behalf of the following respondent(s):

Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.

Please check the appropriate box:

I am a member of the Bar of the Supreme Court of the United States. (Filing Instructions: File a signed Waiver in the Supreme Court Electronic Filing System. The system will prompt you to enter your appearance first.)
 I am not presently a member of the Bar of this Court. Should a response be requested, the response will be filed by a Bar member. (Filing Instructions: Mail the original signed form to: Supreme Court, Attn: Clerk's Office, 1 First Street, NE, Washington, D.C. 20543).

Signature:



Date:

5/6/24

(Type or print) Name **Lindsey B. Mann**

Mr. Ms. Mrs. Miss

Firm

Troutman Pepper Hamilton Sanders LLP

Address

600 Peachtree Street, NE, Suite 3000

City & State

Atlanta, Georgia

Zip 30308

Phone

404-885-2473

Email lindsey.mann@troutman.com

A copy of this form must be sent to petitioner's counsel or to petitioner if *pro se*. Please indicate below the name(s) of the recipient(s) of a copy of this form. No additional certificate of service or cover letter is required.

W.A. Griffin (pro se Petitioner)

cc: