

## COMMONWEALTH OF KENTUCKY DEPARTMENT OF INSURANCE Mayo-Underwood Building 500 Mero Street 2SE11 Frankfort, KY 40601 /P.O. BOX 517 FRANKFORT, KENTUCKY 40602 502-564-6082 FAX 502-564-4604

REQUIRED for ALL Insurers filing an Annual Statement.

## **Certificate On Advertising - Accident And Health**

In accordance with 806 KAR 12:010, Section 18 (2), the following statement is made:
The undersigned, an authorized officer of
(Name of Insurer)
charged with the supervision and dissemination of advertising for said insurer, does hereby certify that, to the best of
his/her knowledge, information and belief, the advertisements, advertising material, sales literature and sales aids
which were disseminated by aforesaid insurance company, during the year, concerning any policy described
n 806 KAR 12:010 Section 1(2) complied or were made to comply in all respects with the insurance laws of the
Commonwealth of Kentucky as implemented and interpreted by the advertisement regulations enacted pursuant to
aws, including (but not limited to) 806 KAR 12:010; or the aforesaid insurance company, during the year, did
not advertise or sell in Kentucky any policy described in 806 KAR 12:010 Section 1(2).
(DATE)
(DATE) (NAME)
(TITLE)
(INSURANCE COMPANY)

806 KAR 12:010 Section 1(2) - "Policy for the purpose of the advertisement regulations shall include any policy, plan, certificate, contract, agreement, statement of coverage, rider, or endorsement which provides accident or sickness benefits or medical, surgical or hospital expense benefits, whether on a cash indemnity, reimbursement, or service basis, except when issued in connection with another kind of insurance other than life, and except disability and double indemnity benefits included in life insurance and annuity contracts."