**ADVERTISING CERTIFICATE OF COMPLIANCE**

1. Company Name

2. NAIC CoCode

3. Reporting Year

To the best of my knowledge, information, and belief, the advertisements which were disseminated by or on behalf of the above insurer in North Carolina during the preceding statement year complied or were made to comply in all respects with the provisions of the insurance laws, rules, and regulations of the State of North Carolina.

(Check all that apply)

1. \_\_\_\_\_ Accident & Health (Comply with 11 NCAC 12.0534)
2. \_\_\_\_\_ Life & Annuities (Comply with 11 NCAC 12.0431)
3. \_\_\_\_\_ Medicare (Comply with applicable regulations promulgated by the Centers for Medicare and Medicaid Services and 11 NCAC 12.0534, to the extent not preempted by applicable federal laws, rules, and regulations.)
4. \_\_\_\_\_ The above insurer is not actively writing Accident & Health, Life, and/or Annuities in North Carolina.
5. \_\_\_\_\_ Other (Please explain below)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Company Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date