



State of Delaware Life & Health Filing Fee Form

Department Use Only

Tracking #: _____

Company Name on Check _____ Group Name _____

Check/EFT Amount _____ Total # of Forms (Please itemize forms below) _____

Check # _____ Company Filing Number _____

Date of Check or EFT Transaction _____ SERFF Tracking Number _____

Date Check Mailed _____ Type of Filing Life Health

Effective Date of Filing _____

Check Appropriate Block(s) Rates Advertisements Forms

Check Appropriate Block(s) Credit Life Credit A&H Group Life Group A&H Group Annuity
LTC Individual A&H Other Life Other A&H Other Annuity Med Supp

Filing Fees are: \$50 per Form, per Rate, per Company, per Filing. Advertisements are \$50 per Filing per Company.

NAIC #	Company Name	Form Number	Description	Fee Total

Grand Total

Mail to:
Delaware Insurance Department
Rates and Forms
841 Silver Lake Blvd.
Dover, DE 19904

You may attach additional filing fee forms as needed