

NEW HAMPSHIRE INSURANCE COMPANY
1271 AVE OF THE AMERICAS FL 37
NEW YORK NY 10020-1304

NOTICE OF CANCELLATION OF INSURANCE

Named Insured & Mailing Address:

Producer: 0080751

KATHY O TEST
1 MAIN ST
WICHITA KS 67052

K & K INSURANCE GROUP INC
PO BOX 2338
FORT WAYNE IN 46801-2338

Policy No.: KO-123456789-0
Type of Policy: GENERAL LIABILITY
Date of Cancellation: 06/17/2022; 12:01 A.M. Standard Time at the mailing address of the Named Insured.

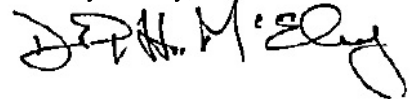
We are cancelling this policy. Your insurance will cease on the Date of Cancellation shown above.

The reason for cancellation is KATHY O TESTING FOR KS GENERAL LIABILITY CANCELLATION

Named Insured

KATHY O TEST
1 MAIN ST
WICHITA KS 67052

Date Mailed:
12th day of May, 2022



DAVID H. MCELROY