13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

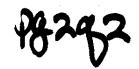
STREET ADDRESS

CITY-ST-7IP

80 PINE ST, 13TH FLOOR

**NEW YORK NY 10005** 

Date





ACCOUNT NO. : 072100000032

REFERENCE :

134356

4320171

AUTHORIZATION

ORDER DATE: May 1, 2001

ORDER TIME : 11:09 AM

ORDER NO. : 134356-175

CUSTOMER NO: 4320171

CUSTOMER: Ms. Bernadette Colon

American International Group,

70 Pine Street 30th Floor

New York, NY 10270

ANNUAL REPORT FILING

NAME:

DELAWARE AMERICAN LIFE

INSURANCE COMPANY

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - Ext. 1118delete

EXAMINER'S INITIALS: