**Advertising Approval Request Form**

Office of Management and Enterprise Services (OMES)

Employees Group Insurance Division (EGID)

Plan Year 2021

1. All Plan Year advertising/promotional items for Oklahoma Employees Insurance and Benefits Act (OEIBA) Program members must be submitted to EGID for prior approval.
   1. All advertising must comply with RFP requirements and State of Oklahoma regulations.
   2. The information provided in the advertisement must be accurate and not misleading.
   3. Supplier must request and receive advertising approval **each** Plan Year regardless if the advertisement was approved in a previous plan year.
   4. Suppliers do not require EGID approval when marketing directly to Supplier’s current membership.
   5. Suppliers shall not use references to ‘EGID’ and ‘OEIBA’ in marketing materials.
2. This form must accompany all ads submitted to EGID for approval at least ten (10) business days in advance of the scheduled advertising date.
   1. The advertisement must be submitted for review in its entirety. For example, if a flyer has a front and a back page, the Supplier must submit a copy of both the front and back pages for EGID approval.
   2. Multiple items may be attached to one request.
   3. If an item is rejected by EGID, the Supplier must re-submit the item for approval separately with a new Advertising Approval Request Form.
   4. Send this form and the proposed advertisement(s) for consideration to: [EGIDVendorReporting@omes.ok.gov](mailto:EGIDVendorReporting@omes.ok.gov).
      1. Subject line in email must state: “Advertising Approval Request – [Supplier Name] – Date Submitted”
3. Supplier must provide a script in conjunction with any video or radio advertising requests. The script must match the advertisement.
4. Advertisements that reference a Supplier’s performance in surveys, awards or recognition by other organizations should be no older than two (2) years. Proof and/or clarification of the accuracy of such statements may be requested by EGID.

**NOTE:** The advertising approval process is to ensure uniform and equitable marketing standards are in place across all Suppliers. Suppliers are responsible for the accuracy of all information in marketing materials. Any costs incurred by Supplier to correct errors will be borne by Supplier.

**Complete the following:**

Supplier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supplier Representative Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Advertising: (Newspaper, Magazine, Radio, Television, Outdoor/Billboard, In/On Public Transport, Poster, Cinema, Facebook, Twitter, PowerPoint Presentation, Other- specify)

Type\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide a complete description of the item or promotion and attach a copy, if applicable:

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Ad Schedule: (List all publications, locations and/or radio/TV stations and corresponding dates that ads are scheduled to run).

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| --- | --- | --- |
| **Date(s)** | **Publication(s)** | **Location(s)** |
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Supplier Additional Disclosures, if any: