# BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF OKLAHOMA

STA	TE OF OKLAHON	TA FILE
STATE OF OKLAHOMA, ex rel. JOHN DOAK, Insurance Commissioner,	)	FEB 1 6 2012 INSURANCE COMMISSIONER OKLAHOMA
Petition	oner, )	THOMA SIONER
	)	
v.	)	CASE NO. 12-0153-DIS
	)	
MACK K MOBLEY, a licensed insurance	e )	
producer in the State of Oklahoma,	)	
	)	
Respo	ondent. )	

# CONDITIONAL ADMINISTRATIVE ORDER AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, by and through counsel and alleges and states as follows:

## **JURISDICTION**

- John D. Doak is the Insurance Commissioner of the State of Oklahoma and as such is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code 36 O.S. §§ 101-7004.
- 2. Respondent Mack K. Mobley ("Respondent") is a licensed producer in the State of Oklahoma holding license number 2442457.

#### **FINDINGS**

- 1. On or about November 3rd, 2011, an inquiry regarding a claim which arose under an insurance contract was forwarded by the Oklahoma Insurance Department to Respondent.
  - 2. The thirtieth (30<sup>th</sup>) day after the date of the inquiry was December 3rd, 2011.
- 3. As of the date of this Order Respondent has failed to provide any response to the inquiry.

# CONCLUSION

The allegations are found to be true and correct and Respondent has violated 36 O.S. § 1250.4(B) by failing to furnish an adequate response to an inquiry from the Commissioner within thirty (30) days from the date of the inquiry.

#### ORDER

IT IS THEREFORE ORDERED that Respondent shall provide a response to the inquiry referenced above and is fined in the amount of Five Hundred Dollars (\$500.00). The response and fine are to be submitted to the Oklahoma Insurance Department within thirty (30) days of the date of this Order.

Respondent is further notified that they may request a hearing within 30 days of the receipt of this Order concerning this action and upon such request the Insurance Department shall conduct a hearing before an independent hearing examiner. A request for hearing shall be made in writing to Mark A. Willingham, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> Suite 100, Oklahoma City, Oklahoma 73112 and state the basis for requesting the hearing.

If Respondent does not request a hearing within the 30 days allotted this Order shall be a **FINAL ORDER** on the 31<sup>st</sup> day following the receipt of the Order.

WITNESS My Hand and Official Seal this 16th day of February, 2012.



JOHN D. DOAK INSURANCE COMMISSIONER STATE OF OKLAHOMA

Mark A. Willingham
Assistant General Counsel
3625 NW 56<sup>th</sup> Street, Suite 100
Oklahoma City, OK 73112
(405) 521-2746

## CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing Order was mailed certified, return receipt requested on this 16th day of February, 2012, to:

Mack K. Mobley 4717 S. Mingo Rd, #H Tulsa, OK 74146

CERTIFIED MAIL NO: 7008 1830 0003 9411 8924

Mark A. Willinghan

U.S. Postal Service™ CERTIFIED MAILTM RECEIPT 유민교 (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com 9477 UTHER Postage Certified Fee 0003 Postmark Return Receipt Fee (Endorsement Required) 201 Here Restricted Delivery Fee (Endorsement Required) 1830 Total Postage { Mack K. Mobley Sent To 4717 S. Mingo Rd. #H 7008 Street, Apt. No.; or PO Box No. City, State, ZIP+4 12-0153-DIS/MAW(mt)Con.Adm.Ord.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>RECEIVED OKLAHOMA INSURANCE DEMARK K. Mobley 4717 S. Mingo Rd. #H Tulsa, OK 74146</li> <li>12-0153-DIS/MAW(mt)Con.Adm.Ord.</li> </ul> </li> </ul>	12 2012
2. Article Number 7008 1830 (Transfer from service label)	0003 9411 8924
PS Form 3811, February 2004 Domestic Retu	ırn Receipt 102595-02-M-1540