

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED

SEP 17 2015

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D.
DOAK, Insurance Commissioner,

Petitioner,

vs.

BRAD CAMERON MORONEY, a licensed
insurance producer in the State of Oklahoma,
Respondent.

CASE NO. 15-1026-DIS

**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

1. 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 Brad Cameron Moroney ("Moroney") is a licensed insurance producer in the State of Oklahoma holding license number #79964.

ALLEGATIONS OF FACT

1. On or about August 27, 2015 Moroney drafted a letter in regards to a tenant landlord matter, utilizing a seal of the State of Oklahoma without authorization.

2. On September 8, 2015, during an interview with Oklahoma Insurance Department Investigators Tyler Stiles (Stiles) and Lewis Garrison (Garrison), Moroney admitted to drafting the documents and using the State of Oklahoma Seal on letter head without proper permissions.

3. Moroney did not personally benefit from the transaction, and admitted his mistake.

ALLEGED VIOLATIONS OF LAW

1. Respondent violated 36 O.S. § 1435.13 A (8); by demonstrating incompetence and financial irresponsibility in the conduct of business in the state of Oklahoma or elsewhere.

ORDER

IT IS THEREFORE ORDERED that Respondent is fined in the amount of Two Hundred and Fifty Dollars (\$250.00). The fine is to be submitted to the Oklahoma Insurance Department within thirty (30) days of the date of this Order. The \$250.00 civil fine shall be paid by money order or cashier's check.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that this Order is a Conditional Order. Unless the Respondent requests a hearing with respect to the Allegations of Fact set forth above within thirty (30) days of the date of mailing of this Order, this Order and the penalties set forth above shall become a Final Order on the thirty-first day following the date of mailing this Order. A request for hearing should be in writing addressed to Matt McKinnon, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112. The request for hearing must state the grounds for the request to set aside or modify the Order.

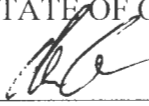
Any such hearing shall be conducted according to the procedures for contested cases under the Insurance Code and 75 O.S. § 250-323. If the Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as notice of the matters to be reviewed at the hearing, and the Allegations of Fact, Alleged Violations of Law, and penalties imposed in this Conditional Order shall be considered withdrawn, pending final

resolution at the hearing.

WITNESS My Hand and Official Seal this 17th day of September, 2015.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA



Matt McKinnon
Assistant General Counsel
3625 NW 56th Street, Suite
Oklahoma City, Oklahoma, 73112
(918) 295-3714

CERTIFICATE OF MAILING

I, Matt McKinnon, hereby certify that a true and correct copy of the above and foregoing Conditional Administrative Order and Notice of Right to be Heard was mailed by certified mail with postage prepaid and return receipt requested on this 17th day of September, 2015, to:

Brad Moroney
1085 S Western
Guthrie, OK 73044

CERTIFIED MAIL NO. 7015 0640 0004 4933 5537

and a copy was delivered to:

Karen Wojtek
Producer Licensing Division



Matt McKinnon
Assistant General Counsel

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

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Certified Mail Fee
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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____



Sent To
 Street and Apt. No., or PO Box
 City, State, ZIP+4®

Brad Moroney
 1085 S Western
 Guthrie, OK 73044
sms/15-1026-DIS/Cond Ord

PS Form 3800, April 2015 PSN

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Brad Moroney 1085 S Western Guthrie, OK 73044 sms/15-1026-DIS/Cond Ord</p> </div> <p style="text-align: center;">9590 9403 0272 5155 0748 09</p>	<p>B. Received by (Printed Name) <u>BRAD MORONEY</u> C. Date of Delivery <u>9/23/15</u></p>
<p>2. Article Number (Transfer from service label) 7015 0640 0004 4933 5537</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">SEP 23 2015 Legal Division</p>
<p>PS Form 3811, April 2015 PSN 7530-02-000-9053</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery (over \$500)</p> <p style="text-align: right;">Domestic Return Receipt</p>