

**BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA**

**FILED**  
**JUL 02 2019**  
**INSURANCE COMMISSIONER**  
**OKLAHOMA**

**STATE OF OKLAHOMA, ex rel. GLEN  
MULREADY, Insurance Commissioner,**

**Petitioner,**

**v.**

**KIMBERLY LYNN PERRA,  
a non-resident insurance  
producer,**

**Respondent.**

**Case No. 19-0332-DEN**

**CONDITIONAL ADMINISTRATIVE ORDER**  
**AND NOTICE OF RIGHT TO BE HEARD**

**COMES NOW** the State of Oklahoma, ex rel. Glen Mulready, Insurance Commissioner,  
by and through his counsel, Sara A. Worton, and alleges and states as follows:

**JURISDICTION**

1. Glen Mulready is the Insurance Commissioner of the State of Oklahoma and is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101 *et seq.*, including the Oklahoma Producer Licensing Act, 36 O.S. §§ 1435.1 through 1435.41.

2. Respondent Kimberly Lynn Perra ("Respondent") is a non-resident insurance producer holding license number 40084696. Respondent's mailing address of record is 605 Eugene Street, Merrill, Wisconsin.

3. The Insurance Commissioner may place on probation, censure, suspend, revoke or refuse to issue or renew a license issued pursuant to the Oklahoma Producer Licensing Act and/or may levy a fine up to \$1,000.00 for each occurrence of a violation of the Oklahoma Insurance Code. 36 O.S. § 1435.13(A) and (D).

### ALLEGATIONS OF FACT

1. Respondent applied for renewal of her non-resident insurance producer license on or about May 13, 2019, with the Oklahoma Insurance Department ("OID").
2. On the application form, question 2 asks the following: "[h]ave you been named or involved as a party in an administrative proceeding...which has not been previously reported to this insurance department?" Respondent answered "no" to this question.
3. A background check conducted by the OID Licensing Division showed that Respondent had administrative action taken against her producer license by the Wisconsin Commissioner of Insurance in OCI Legal File No. 18-C42845 with the final order issued on October 25, 2018.
4. Respondent did not report the Wisconsin administrative action to OID.

### ALLEGED VIOLATIONS OF LAW

1. Respondent violated *36 O.S. § 1435.13(A)(1)* by providing incorrect, misleading, incomplete or materially untrue information in the license application.
2. Respondent violated *36 O.S. § 1435.18(A)* by failing to report to the Insurance Commissioner an administrative action in another jurisdiction within 30 days of the final disposition of the matter.

### ORDER

**IT IS THEREFORE ORDERED** by the Insurance Commissioner that Respondent is hereby **CENSURED** and **FINED \$100.00** for violation of *36 O.S. §§ 1435.13(A)(1) and 1435.18(A)*. **The \$100.00 fine is to be paid within 30 days** made payable to the Oklahoma Insurance Department. The \$100.00 civil fine shall be paid by **money order or cashier's check**. Respondent's renewal application for non-resident insurance producer license may be granted

upon receipt of payment of the fine. Failure to pay the civil fine or request a hearing within 30 days will result in your license application being withdrawn.


**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 30 days of the date of mailing of this Order, this Order and the penalties set forth above will 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 Sara A. Worten, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> Street, 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 2nd day of July 2019.



GLEN MULREADY  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

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



**CERTIFICATE OF MAILING**

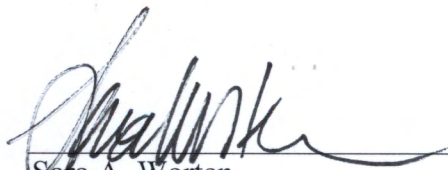
I, Sara A. Worten, hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to be Heard* was sent by electronic mail and mailed by certified mail, with postage prepaid and return receipt requested, on this ~~this~~ **and** day of July 2019 to:

Kimberly Perra  
605 Eugene Street  
Merrill, WI 54452-9497  
[kperra@churchmutual.com](mailto:kperra@churchmutual.com)

**CERTIFIED MAIL NO.**  
**9214 8902 0982 7500 0219 59**

and a copy was delivered to:

Courtney Khodabakhsh  
Licensing Division

  
\_\_\_\_\_  
Sara A. Worten  
Assistant General Counsel



19-0332-DEN  
STW

Date Produced: 07/15/2019

OKLAHOMA INSURANCE DEPARTMENT:

The following is the delivery information for Certified Mail™/RRE item number 9214 8902 0982 7500 0219 59. Our records indicate that this item was delivered on 07/08/2019 at 01:42 p.m. in MERRILL, WI 54452. The scanned image of the recipient information is provided below.

Signature of Recipient :

*Kimberly Perrera*  
*Kimberly Perrera*

Address of Recipient :

*Kimberly Perrera*

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,  
United States Postal Service

The customer reference number shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

This USPS proof of delivery is linked to the customers mail piece information on file as shown below:

KIMBERLY PERRA  
605 EUGENE ST  
MERRILL WI 54452-9497

Customer Reference Number: C1473578.8204500