

BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA

STATE OF OKLAHOMA, ex rel. GLEN )  
MULREADY, Insurance Commissioner, )  
 )  
Petitioner, )  
v. )  
 )  
PRECIOUS E. COLEMAN, )  
a resident adjuster, )  
 )  
Respondent. )

Case No. 25-0146-DIS

FILED

FEB 21 2025

INSURANCE COMMISSIONER  
OKLAHOMA

**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 counsel, Antuanya "Bo" DeBose, and states as follows:

**JURISDICTION**

1. Glen Mulready 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. §§ 101-7401, including the Insurance Adjusters Licensing Act, 36 O.S. § 6201 et seq..
2. Precious E. Coleman ("Respondent") is a licensed adjuster in the state of Oklahoma holding license number 108292. Respondent's address of record is [REDACTED]  
[REDACTED].
3. If the Respondent requests a hearing in writing pursuant to OAC 365:1-7-1, the Insurance Commissioner, pursuant to 36 O.S. § 319, will appoint an independent hearing examiner who shall sit as a quasi-judicial officer and preside over the hearing.

### **FINDINGS OF FACT**

1. On or about December 17, 2024, the Oklahoma Insurance Department's Consumer Assistance Division ("OID") received a complaint from Judy Yarasheski (the "Complainant"). The OID file number for this complaint is 125846, involving the Complainant's claim number OKHO-00010449.
2. On or about December 17, 2024, the OID emailed a letter to the Respondent and requested a response within twenty (20) days of receipt.
3. A response from the Respondent indicated the following: "To further clarify this, please be advised the claims adjuster that handled this file was Precious Elisa Coleman Hoggatt. Our understanding is her name filed with the department of insurance may be under her previous name Precious E. Coleman . . . Since working with Mercury Insurance, she goes by Elisa Hoggatt."
4. The Respondent's name in the State Based System ("SBS") is listed as Precious E. Coleman.
5. Pursuant to 36 O.S. 6206(C), an adjuster licensee shall promptly notify the Insurance Commissioner within thirty (30) days of any change in legal name or preferred mailing address, physical business address, e-mail address, or physical residential address of the licensee. A change in legal name or address thirty (30) days after the change must include an administrative fee of Fifty Dollars (\$50.00). Failure to provide acceptable notification of a change of legal name or address to the Insurance Commissioner within forty-five (45) days of the date the administrative fee is assessed will result in penalties.
6. Pursuant to 36 O.S. § 6220(A)(15), the Commissioner may censure, suspend, revoke, or refuse to issue or renew a license pursuant to the Insurance Adjusters Licensing Act, levy a civil penalty, or any combination of actions for failing to inform the Department, by any means acceptable to the Department, of a change of address, change of legal name or change of

information submitted on the application within thirty (30) days of the change.

7. Pursuant to 36 O.S. § 6220(B), in addition to or in lieu of any applicable denial, suspension, or revocation of a license, any person violating the provisions of the Insurance Adjusters Licensing Act may be subject to a civil fine of not more than One Thousand Dollars (\$1,000.00) for each violation. This fine may be enforced in the same manner in which civil judgment may be enforced.

#### **CONCLUSIONS OF LAW**

1. The Respondent has violated 36 O.S. § 6206(C), along with 36 O.S. § 6220(A)(8) and (A)(15) by failing to inform the Department of a change of address, change of legal name or change of information submitted on the application within thirty (30) days of the change.

#### **ORDER**

**IT IS THEREFORE ORDERED that the Respondent is fined in the amount of Five Hundred Dollars (\$500.00).** The fine shall be made payable to the Oklahoma Insurance Department and sent to the Oklahoma Insurance Department located at 400 NE 50<sup>th</sup> Street, Oklahoma City, Oklahoma 73105. Failure to comply with a proper order from the Commissioner will result in further administrative action.

**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 Findings of Fact set forth above within thirty (30) days of the date of this Conditional Order, the penalties set forth above will become a Final Order on the 31st day following the date of mailing this Order. A request for hearing should be in writing and addressed to Antuanya "Bo" DeBose, Oklahoma Insurance Department, Legal Division, 400 NE 50<sup>th</sup> Street, Oklahoma City, Oklahoma 73105. The request for hearing must state the grounds for the request to set aside or modify the Order and must be served on the Oklahoma Insurance Department within



the thirty (30) days allotted. The proceedings on such requested hearing will be conducted in accordance with the Oklahoma Insurance Code, 36 O.S. §§ 101 et seq., and the Oklahoma Administrative Procedures Act, 75 O.S. §§ 250 through 324. If the Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order will act as a notice of the matters to be reviewed at the hearing and the Findings of Fact, Conclusions 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 21<sup>st</sup> day of February 2025.



GLEN MULREADY  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

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#### CERTIFICATE OF MAILING

I hereby certify that a true and correct copy of the above and foregoing *Conditional Order* was mailed by regular mail and by certified mail, with postage prepaid and return receipt requested, on this 21<sup>st</sup> day of February, 2025, to:

Precious E. Coleman

[phoggatt@mercuryinsurance.com](mailto:phoggatt@mercuryinsurance.com)

CERTIFIED MAIL NO.  
9214 8902 0982 7500 0691 11

and a copy was delivered to: Consumer Assistance Division

Antuanya DeBose  
Antuanya "Bo" DeBose