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) **SS:**
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CAUSE NUMBER: 7815-AG09-0202-028

Jeffrey Hall
Agent / Respondent

1132 Cedar Ln.
Northbrook, IL 60062

Type of Agency Action: Enforcement

Indiana Insurance License No.: 555747

FILED

MAR 09 2009

STATE OF INDIANA
DEPT. OF INSURANCE

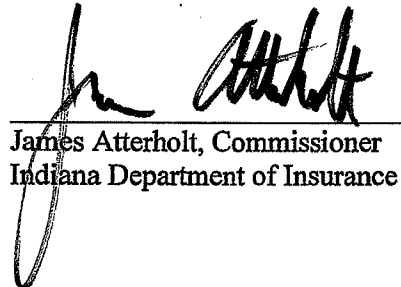
1. Respondent shall pay an administrative fine in the amount of one thousand dollars (\$1000.00), payable within sixty (60) days from the date this Final Order is filed.

2. Respondent, if Respondent has not already done so, shall file a semi-annual tax report for January through June 2008 within ten (10) days from the date this Final Order is filed.

3. Respondent shall be on probation for a period of one (1) year during which time, and at all times in the future, Respondent shall comply with Indian Insurance Law including Indiana Code 27-1-15.8-4(c).

4. The Department shall accept Respondent's compliance with the terms of this Final Order as full resolution of this matter.

ALL OF WHICH IS ORDERED this 9 day of March, 2009.


James Atterholt, Commissioner
Indiana Department of Insurance

Distribution:

Laura Willett
INDIANA DEPARTMENT OF INSURANCE
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204-2787

STATE OF INDIANA)
COUNTY OF MARION)

) SS:

BEFORE THE INDIANA

COMMISSIONER OF INSURANCE

CAUSE NUMBER: 7815-AG09-0202-028

IN THE MATTER OF:

Jeffrey Hall)
Agent / Respondent)

1132 Cedar Ln.)
Northbrook, IL 60062)

Type of Agency Action: Enforcement)

Indiana Insurance License No.: 555747)

FILED

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STATE OF INDIANA
DEPT. OF INSURANCE

AGREED ENTRY

This Agreed Entry is entered into by Laura A. W. Levenhagen, attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Jeffrey Hall ("Respondent"), a licensed Indiana non-resident insurance producer holding license number - 555747, to resolve all matters in the above referenced administrative action. This Agreed Entry is subject to the review and approval of James Atterholt, Commissioner for the Indiana Department of Insurance.

WHEREAS, Respondent is a licensed non-resident insurance producer holding license number 555747.

WHEREAS, Respondent has been qualified as a surplus lines producer in accordance with and as defined under Indiana Code Section 27-1-15.8 *et seq* and is therefore bound by all requirements and restrictions contained therein.

EXHIBIT

A

WHEREAS, pursuant to Indiana Code 27-1-15.8-4(c) Respondent was required to file a semi-annual tax report for January through June 2008 on or before August 1, 2008.

WHEREAS, Respondent failed to file the above referenced tax report by the specified deadline in violation of Indiana Code 27-1-15.8-4(c).

WHEREAS, the Department and Respondent desire to resolve their differences and settle the issues without the necessity of a hearing;

IT IS THEREFORE, NOW AGREED by and between the parties as follows:

1. The Commissioner has jurisdiction over the subject matter and the Respondent in this administrative action.
2. This Agreed Entry is executed voluntarily by the parties. Respondent voluntarily and freely waives the right to a public hearing on this matter.
3. Respondent voluntarily and freely waives the right to petition for judicial review of this agreement and the Commissioner's Final Order.
4. Respondent agrees to pay an administrative fine in the amount of one thousand dollars (\$1000.00), payable within sixty (60) days from the date the Commission files the Final Order in this matter.
5. Respondent agrees, if Respondent has not already done so, to file a semi-annual tax report for January through June 2008 within ten (10) days from the date the Commission files the Final Order in this matter.
6. Respondent agrees to a probationary period of one (1) year during which time, and at all times in the future, Respondent shall comply with Indian Insurance Law including Indiana Code 27-1-15.8-4(c).

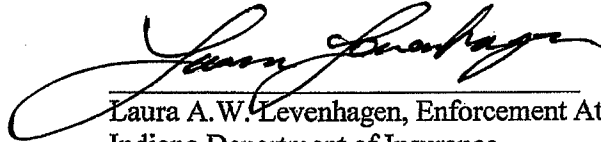
7. The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry as full resolution of this matter.

8. Respondent is aware that his failure to comply with any terms of this agreement will result in the matter being set for hearing.

9. Respondent has carefully read this agreement and fully understands and accepts its terms.

3/4/09
Date Signed

2-26-09
Date Signed



Laura A. W. Levenhagen, Enforcement Attorney
Indiana Department of Insurance



Jeffrey Hall, Respondent

STATE OF ILLINOIS)
COUNTY OF Cook) SS:

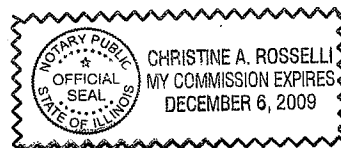
Before me a Notary Public for Cook County, State of ILLINOIS,
personally appeared Jeffrey Hall and being first duly sworn by me upon his oath, states that the
facts alleged in the foregoing instrument are true. Signed and sealed this 26th day
of FEBRUARY 2009.

Christine A. Rosselli
Notary Signature

CHRISTINE A. Rosselli Notary
Name Printed

My Commission expires: 12-6-2009

County of Residence: Cook



Return original NOTARIZED document to:

INDIANA DEPARTMENT OF INSURANCE
Enforcement Division
Suite 300
311 West Washington Street
Indianapolis, IN 46204-2787
317/233-4243 - telephone
317/232-5251 - facsimile