

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 8459-AG09-0824-197

IN THE MATTER OF:

Michael James Baughman
Respondent

3312 Stone Briar Drive
South Bend, IN 46628

License Number: 485494

Type of Agency Action: Enforcement

FILED

SEP 11 2009

STATE OF INDIANA
DEPT. OF INSURANCE

FINAL ORDER AND APPROVAL

The Indiana Department of Insurance ("Department") and Michael James Baughman, ("Respondent"), a licensed resident Indiana Insurance producer, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent's license, and which has been submitted to the Commissioner of Insurance (the "Commissioner") for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Commissioner of Insurance:

1. Respondent shall voluntarily surrender his insurance producer license number 485494, for a period of not less than thirty-six months, effective immediately.

ALL OF WHICH IS ORDERED this 11th day of Sept., 2009.



Carol Cutter, Commissioner
Indiana Department of Insurance

Distribution:

Nikolas P. Mann
INDIANA DEPARTMENT OF INSURANCE
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204-2787

Michael James Baughman
3312 Stone Briar Drive
South Bend, In 46628

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AGREED ENTRY

This Agreed Entry is entered into by Nikolas P. Mann, Attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Michael James Baughman ("Respondent"), a licensed Indiana resident insurance producer, to resolve all matters in the administrative action commenced by the Department. This Agreed Entry is subject to the review and approval of Carol Cutter, Commissioner for the Indiana Department of Insurance.

WHEREAS, Respondent is a licensed resident insurance producer in the State of Indiana, holding license number 485494; and,

WHEREAS, the Department commenced an investigation of Respondent after receipt of information that Respondent had assisted an insured in preparing a living will. Respondent charged the insured a seventy-five dollar (\$75.00) fee for the service; and,

WHEREAS, the Department and Respondent desire to resolve their differences and settle the issues without the necessity of an administrative 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 his right to a public hearing on this matter.

3. Respondent voluntarily and freely waives his right to petition for judicial review of this agreement and the Commissioner's Final Order.

4. Respondent agrees to voluntarily surrender his Indiana insurance producer license number 485494 for a period of time not less than thirty-six (36) months. The voluntary surrender will be effective the date the Commissioner signs the Final Order in this matter.

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

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


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

8-27-09

Date Signed

8-27-09

Date Signed



Nikolas P. Mann, Attorney
Indiana Department of Insurance



Michael James Baughman, Respondent

STATE OF INDIANA)
) SS:
COUNTY OF INDIANA)

Before me a Notary Public for St. Joseph County, State of INDIANA,
personally appeared Michael James Baughman and being first duly sworn by me upon his oath,
says that the facts alleged in the foregoing instrument are true. Signed and sealed this 27 day
of August, 2009.

Teresa M. Lile
Signature

Teresa M. Lile
Printed

My Commission expires: July 27, 2011

County of Residence: St. Joseph

Return executed originals 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