

STATE OF INDIANA)
) SS:
COUNTY OF MARION)

BEFORE THE INDIANA
COMMISSIONER OF INSURANCE

CAUSE NUMBER: 9198-AG10-0415-073

IN THE MATTER OF:)

John Mark Sneed)
Respondent)

1056 Swinford)
Shelbyville, IN 46176)

License Number: 430594)

Type of Agency Action: Enforcement)

FILED

MAY 07 2010

STATE OF INDIANA
DEPT. OF INSURANCE

FINAL ORDER AND APPROVAL

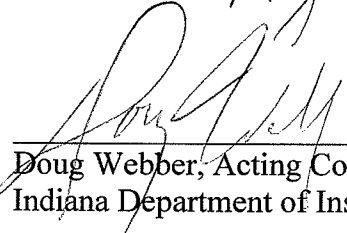
The Indiana Department of Insurance (“Department”) and John Mark Sneed, (“Respondent”), a licensed resident Indiana insurance producer, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent’s license, and which has been submitted to 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 by the Commissioner of Insurance:

1. Respondent's insurance producer license number 430594 is permanently revoked, effective immediately.

ALL OF WHICH IS ORDERED this 7th day of May, 2010.



Doug Webber, Acting Commissioner
Indiana Department of Insurance

Distribution:

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

John Mark Sneed
1056 Swinford
Shelbyville, IN 46176

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STATE OF INDIANA
DEPT. OF INSURANCE

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 John Mark Sneed ("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 Doug Webber, Acting Commissioner for the Indiana Department of Insurance.

WHEREAS, Respondent is a licensed resident insurance producer in the State of Indiana, holding license number 430594; and,

WHEREAS, the Department commenced an investigation of Respondent after receipt of information that Respondent had been terminated for cause by United Teacher Associates Insurance Company, based on allegations of misrepresentation and forgery; 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:

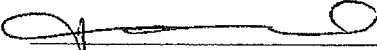
1. The Commissioner has jurisdiction over the subject matter and the Respondent in this administrative action.
2. This Agreed Entry is executed voluntarily by the parties. Respondent voluntarily and freely waives his right to a public hearing on this matter.
3. Respondent voluntarily and freely waives his right to petition for judicial review of this agreement and the Commissioner's Final Order.
4. Respondent agrees to the permanent revocation of his insurance producer license number 430594.
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.

5/7/10
Date Signed

4-30-2010
Date Signed



Nikolas P. Mann, Attorney
Indiana Department of Insurance



John Mark Sneed, Respondent

STATE OF INDIANA)
) SS:
COUNTY OF _____)

Before me a Notary Public for Boone County, State of Indiana,
personally appeared John Mark Sneed 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 30 day of
April, 2010.

J. Macalek
Notary Signature

JAMES W. Macalek
Printed

My Commission Expires: 12/28/2010

County of Residence: Boone

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