STATE OF INDIANA)) SS:	BEFORE THE INDIANA COMMISSIONER OF INSURANCE
COUNTY OF MARION)	CAUSE NO.: 14665-AG15-1022-272
IN THE MATTER OF:)
Barbara D. Fife Respondent	
14074 Trade Center Dr #110 Fishers, IN 46038	OCT 26 2015) STATE OF INDIANA
License Number: 1574330	DEPT. OF INSURANCE
Type of Action: Enforcement)

ADMINISTRATIVE ORDER NOTICE OF NONRENEWAL OF LICENSE

The Indiana Department of Insurance, pursuant to, Indiana Code § 4-21.5-1 <u>et seq.</u> and Indiana Code § 27-1-15.6-12, hereby gives notice to Barbara Fife, ("Respondent") of the following Administrative Order:

- 1. Respondent, a resident of Indiana, is a licensed resident insurance producer under license number 1574330.
 - 2. Respondent has been licensed in the state of Indiana since December of 1986.
 - 3. Respondent's resident producer's license expires on October 31, 2015.
- 4. On or about October 16, 2015 the Enforcement Division was notified that Respondent was barred from associating with any FINRA-regulated firm in any capacity in September of 2015 for allegedly converting funds from a firm customer. Respondent was unwilling to provide the any requested documents and information to FINRA regarding the allegations.

Indiana Code 27-1-15.6-12(b)(9) states, in part, that the Commissioner may refuse 5.

to renew an insurance producer's license for having an insurance producer license, or its

equivalent, denied, suspended, or revoked in any other state.

Indiana Code § 27-1-15.6-12(d) requires the Commissioner to notify a licensee of 6.

the reason for the nonrenewal of his license. This Order serves as that notice.

7. The Commissioner further notifies Respondent that, pursuant to Indiana Code §

27-1-15.6-12(d), Respondent may, within sixty thee (63) days of receiving this Order, make a

written demand upon the Commissioner for a hearing to determine the reasonableness of this

action. Such a hearing shall be held within thirty (30) days from the date of receipt of

Respondent's written demand.

WHEREFORE, based on the foregoing, the Commissioner of Insurance hereby notifies

Respondent that his license shall not be renewed.

Stephan W. Robertson, Commissioner Indiana Department of Insurance

Certified Mail Receipt Number: 91 7190 0005 2720 0050 7454

Copies to: Barbara Fife 14074 Trade Center Dr. #110 Fishers, IN 46038

Melissa Higgins, Investigator Indiana Department of Insurance 311 West Washington St. #103 Indianapolis, IN 46204-2787