| STATE OF INDIANA) | BEFORE THE INDIANA | | |
|--------------------------------|-----------------------------------|--|--|
| COUNTY OF MARION) | COMMISSIONER OF INSURANCE | | |
| | Cause Number: 15104-AG16-0324-070 | | |
| IN THE MATTER OF |) | | |
| David Raabe |) | | |
| 2010 W. Lawson Rd | | | |
| Marion, IN 46952 |) | | |
| Respondent | S APR 22 2016 | | |
| | STATE OF INDIANA | | |
| Type of Agency Action: Enforce | DEPT OF INISTRANCE | | |
| Resident Producer License # 23 | , 316660) | | |

FINAL ORDER

The Enforcement Division of the Indiana Department of Insurance ("Department"), by counsel Brigitte Collier, and David Raabe ("Respondent"), a licensed resident insurance producer, signed an Agreed Entry which purports to resolve all issues involved in the above-captioned cause number, and which has been submitted to the Commissioner of the Indiana Department 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, attached, 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 as follows:

- 1. Respondent shall pay a civil penalty of Two Hundred and Fifty Dollars and 00/100 (\$250.00), for failing to report an administrative action taken by Financial Industry Regulatory Authority (FINRA).
- 2. The Department agrees to accept this agreement as full resolution of this matter.

ALL OF WHICH IS ORDERED this 22rd day of April 2016.

Steph n W. Robertson

Commissioner

Indiana Department of Insurance

Distribution:

Melissa Higgins, Investigator INDIANA DEPARTMENT OF INSURANCE 311 West Washington Street, Suite 103 Indianapolis, Indiana 46204-2787

David Raabe 2010 W. Lawson Rd Marion, IN 46952

Certified Mail Receipt: 91 7190 0005 2720 0058 8187

| STATE OF INDIANA) | BEFORE THE INDIANA | | |
|--|-------------------------------------|--|--|
| COUNTY OF MARION) SS: | COMMISSIONER OF INSURANCE | | |
| | CAUSE NUMBER:15104-AG16-0324-070 | | |
| IN THE MATTER OF: |) | | |
| David Raabe 2010 W. Lawson Rd Marion, IN 46952 | | | |
| Respondent | APR 22 2016 | | |
| Type of Agency Action: Enforcement | STATE OF INDIANA DEPT. OF INSURANCE | | |
| Resident Producer License: 2316660 |) | | |

AGREED ENTRY

This Agreed Entry is executed by and between the Enforcement Division of the Indiana Department of Insurance ("Department"), by counsel Brigitte Collier and David Raabe ("Respondent"), to resolve all issues in the above-captioned cause number. This Agreed Entry is subject to the review and approval of Stephen W. Robertson, Commissioner of the Indiana Department of Insurance ("Commissioner").

WHEREAS, on May 4, 1993, Respondent obtained an Indiana resident producer's license under number 2316660;

WHEREAS, Indiana Code §27-1-15.6-17(a) states that producers shall report to the Commissioner any administrative action taken against the producer in another jurisdiction or by another governmental agency in Indiana not more than thirty (30) days after the final disposition of the matter. The report shall include a copy of the order, consent to order, or other relevant legal documents;

WHEREAS, Respondent failed to timely report the December 12, 2013 administrative action taken by the Financial Industry Regulatory Authority ("FINRA") for failing to adhere to high standards while conducting business; and

WHEREAS, the Department and Respondent (collectively, the "Parties") desire to resolve this matter without the necessity of a hearing.

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

- The Commissioner has jurisdiction over the subject matter and the Parties to this Agreed Entry.
- 2. This Agreed Entry is executed voluntarily by the Parties.
- 3. Respondent voluntarily and freely waives the right to a public hearing on this matter.
- 4. Respondent voluntarily and freely waives the right to judicial review of this agreement and the Commissioner's Final Order.
- 5. Respondent shall pay a civil penalty in the amount of Two Hundred and Fifty dollars (\$250.00) within thirty (30) days of the Commissioner's Final Order adopting this Agreed Entry.
- 6. The Department agrees to accept Respondent's compliance with this agreement as full satisfaction of this matter.
- 7. Respondent has carefully read this agreement and fully understands and accepts its terms.
- 8. Respondent has entered into this agreement freely, and has not been subject to duress, threat or undue influence.

- 9. Should this Agreed Entry not be accepted by the Commissioner, it is agreed that presentation to and consideration of this Agreed Entry by the Commissioner shall not unfairly or illegally prejudice the Commissioner from further participation or resolution of these proceedings.
- 10. Respondent is aware that failure to comply with any of the terms of this agreement will result in the matter being set for a hearing.

Indiana Department of Insurance

| STATE OF INDIANA COUNTY OF Grant |)) SS: _) | My Commission | Seal Tammy J. Garcia Notary Public State of Indiana Expires: February 24, 2024 | | |
|---|------------------|---------------|--|--|--|
| Before me a Notary Public | c for <u>Gr</u> | an + | County, State of Indiana, | | |
| personally appeared David Raabe, | 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 | day of _ | April | , 2016. | | |
| | Signa | ture | g.O. | | |
| | Printe | ammy (| J. Garcia | | |
| My Commission expires: 2 | 24-24 | | | | |
| County of Residence: Grant | | • | | | |
| | | | | | |

Seal