

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE

CAUSE NO.: 21064-AG22-0118-010

IN THE MATTER OF: )

Independent Financial Group Inc )  
12671 High Bluff Drive )  
Suite 200 )  
San Diego, CA 92130 )

Respondent. )

Type of Agency Action: Enforcement )

License Number: 34687 )

FILED

MAR 07 2022

STATE OF INDIANA  
DEPT. OF INSURANCE

**FINAL ORDER**

The Enforcement Division of the Indiana Department of Insurance (“Department”), by counsel, Samantha Aldridge, and Independent Financial Group. LLC (“Respondent”), a licensed nonresident producer organization, 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 (“Commissioner”) for approval.

The Commissioner, after reviewing the Agreed Entry, which levies a five hundred dollar (\$500) civil penalty and places Respondent on probation for a period of two (2) years, during which time, Respondent will be required to submit a current list of appointments every six (6) months, due to Respondent failing to timely report the two Administrative Actions, 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 resolution of this matter.

**IT IS THEREFORE ORDERED** by the Commissioner as follows:

1. Respondent's nonresident producer organization license shall be approved contingent upon Respondent's timely payment of the civil penalty. Respondent shall pay a civil penalty in the amount of five hundred dollars (\$500) to the Department within thirty (30) days after the Commissioner signs this Final Order. Failure to timely pay the civil penalty may result in the Department taking an administrative action against Respondent's nonresident producer organization license.
2. Respondent's nonresident producer organization license shall be placed on probation for a period of two (2) years, beginning the date the Commissioner signs this Final Order.
3. During the probationary period, any violations of Title 27 of the Indiana Code will result in the Department seeking immediate revocation of Respondent's license.
4. During the probationary period, Respondent shall submit a current list of appointments to the Department via email at: [Enforcement@idoi.in.gov](mailto:Enforcement@idoi.in.gov) every six (6) months from the date of this Final Order.

3/7/22

Date Signed



Amy L. Beard, Commissioner

Indiana Department of Insurance

Distribution:

Independent Financial Group  
12671 High Bluff Drive Ste 200  
San Diego, CA 92130

Samantha Aldridge, Attorney  
ATTN: Phil Holleman, Sr. Investigator  
Indiana Department of Insurance  
311 West Washington Street, Suite 300  
Indianapolis, IN 46204

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STATE OF INDIANA  
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AGREED ENTRY

This Agreed Entry is executed by and between the Enforcement Division of the Indiana Department of Insurance (“Department”), by counsel, Samantha Aldridge, and Independent Financial Group Inc (“Respondent”), to resolve all issues in the above-captioned cause number. This Agreed Entry is subject to the review and approval of Amy L. Beard, Commissioner of the Indiana Department of Insurance (“Commissioner”).

WHEREAS, Respondent is a licensed nonresident insurance producer organization, holding license number 34687 since December 12, 2003;

WHEREAS, on November 4, 2021, Respondent submitted their renewal application;

WHEREAS, on Respondent’s renewal application, Respondent disclosed Administrative Actions by South Dakota, 2020, and Texas, 2021 to the Department for the first time;

WHEREAS, Indiana Code § 27-1-15.6-12(b)(2)(A), states, in part, that the Commissioner may levy a civil penalty and place a producer on probation for violating an insurance law;

WHEREAS, Indiana Code § 27-1-15.6-17(a) is an insurance law, that states a producer 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;

WHEREAS, Sarah Kreisman, Chief Legal Counsel, of Independent Financial Group, LLC, is authorized to act on behalf of Respondent and obligate it to perform in accordance with this agreement; 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:

1. The Commissioner has jurisdiction over the subject matter and the Parties to this Agreed Entry.
2. In order to avoid formal litigation in this matter, Respondent has determined that it is in his best interest to enter into this Agreed Entry. As such, Respondent acknowledges that he executes this Agreed Entry with full realization of its contents and effects.
3. This Agreed Entry is executed knowingly, voluntarily, and freely by the Parties. The Parties agree that the terms of this Agreed Entry constitute final resolution of this matter.
4. Respondent knowingly, voluntarily and freely waives the right to a public hearing on this matter, including the right to appear in person before the Commissioner, present evidence, cross-examine witnesses, and present arguments.

5. Respondent knowingly, voluntarily and freely waives the right to judicial review of this matter or otherwise appeal or challenge the validity of this Agreed Entry.
6. Respondent knowingly, voluntarily, and freely waives, releases, and forever discharges all claims or challenges, known or unknown, against the Department, its Commissioner, employees, agents, and representatives, in their individual and official capacities, that arise out of or are related to the Agreed Entry or Final Order, including but not limited to any act or omission as part of the underlying audit, investigation, negotiation, or approval process.
7. Respondent's nonresident producer license shall be renewed contingent upon Respondent's timely payment of the civil penalty. Respondent shall pay a civil penalty in the amount of five hundred dollars (\$500) to the Department within thirty (30) days after the Commissioner signs the Final Order adopting this Agreed Entry. Failure to timely pay the civil penalty may result in the Department taking an administrative action against Respondent's nonresident producer license.
8. Respondent shall be placed on probation for a period of two (2) years, beginning the date the Commissioner signs the Final Order adopting this Agreed Entry. During the probationary period, any violation of Title 27 of the Indiana Code will result in the Department seeking immediate revocation of Respondent's license. During the probationary period, Respondent shall submit a current list of appointments to the Department every six (6) months from the date of the Final Order via email at: [Enforcement@idoi.in.gov](mailto:Enforcement@idoi.in.gov).
9. Respondent has carefully read and examined this Agreed Entry and fully understands its terms.

10. Respondent has had the opportunity to have this Agreed Entry reviewed by legal counsel of his choosing, at his own expense, and is aware of the benefits gained and obligations incurred by the execution of this Agreed Entry. Respondent understands and agrees that the Department cannot give his legal advice.
11. Respondent has entered into this Agreed Entry knowingly, voluntarily, and freely, and has not been subject to duress, coercion, threat, or undue influence.
12. This Agreed Entry constitutes the entire agreement between the Parties, and no other promises or agreements, express or implied, have been made by the Department or by any employee, director, agent or other representative thereof to induce Respondent to enter this Agreed Entry.
13. The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry as full satisfaction of this matter and warrants and represents that so long as Respondent complies with the terms of this Agreed Entry, the Department will not bring any further action against Respondent based on the facts that gave rise to this Agreed Entry.
14. In the event the Department finds there has been a breach of any of the provisions of this Agreed Entry, the Department may reopen this matter and pursue alternative action pursuant to Indiana Code § 27-1-15.6-12.
15. Respondent waives any applicable statute of limitations for purposes of any enforcement of the terms and conditions of this Agreed Entry.
16. Respondent acknowledges that this Agreed Entry may be admitted into evidence in any judicial or administrative proceeding against Respondent to enforce the terms and conditions contained herein.

17. Respondent understands that this Agreed Entry resolves only the matter pending with the Department and does not affect any criminal prosecution or civil litigation that may be pending or hereinafter commence against Respondent.
18. This Agreed Entry does not in any way affect the Department's authority in future audits, investigations, examinations, negotiations, or other complaints involving Respondent.
19. It is expressly understood that this Agreed Entry is subject to the Commissioner's acceptance and has no force or effect until such acceptance is evidenced by the entry of a Final Order by the Commissioner.
20. 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 or Respondent from further participation in or resolution of these proceedings.
21. If this Agreed Entry is accepted by the Commissioner, it will become part of Respondent's permanent record and may be considered in future actions brought by the Department or any other regulator against Respondent. It is further understood that, if accepted by the Commissioner, this Agreed Entry and resulting Final Order are public records pursuant to Indiana Code § 4-21.5-3-32 that may not be sealed or otherwise withheld from the public and may be reported to the National Association of Insurance Commissioners and published on the Department's website as required.
22. Respondent acknowledges that this is an Administrative Action he may be required to report to other jurisdictions in which he is licensed and on future licensing applications.



3/2/2022

Date Signed

*Samantha Aldridge 277*

Samantha Aldridge, Attorney 35162-49  
Indiana Department of Insurance

MARCH 2, 2022

Date Signed

*Sarah Kreisman*

Sarah Kreisman, Chief Legal Counsel, Independent  
Financial Group, LLC, Respondent

STATE OF CALIFORNIA )  
COUNTY OF San Diego ) SS:

Before me a Notary Public for San Diego County, State of California,  
personally appeared Sarah Kreisman and being first duly sworn by me upon her oath, says that the  
facts alleged in the foregoing instrument are true.

Signed and sealed this 2nd day of March, 2022.



Kristin T. Moniz  
Signature  
Kristin T. Moniz  
Printed

My Commission expires: November 9, 2023

County of Residence: San Diego

**Return executed originals to:**  
INDIANA DEPARTMENT OF INSURANCE  
Enforcement Division, Suite 103  
311 West Washington Street  
Indianapolis, IN 46204-2787  
317/234-5883 - telephone  
317/234-2103 - facsimile

**CALIFORNIA JURAT WITH AFFIANT STATEMENT**

**GOVERNMENT CODE § 8202**

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

Signature of Document Signer No. 1 \_\_\_\_\_

Signature of Document Signer No. 2 (if any) \_\_\_\_\_

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
 County of San Diego

Subscribed and sworn to (or affirmed) before me  
 on this 2 day of March, 2022  
 by Date Month Year

(1) Sarah Kreisman

(and (2) \_\_\_\_\_),  
 Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence  
 to be the person(s) who appeared before me.

Signature [Handwritten Signature]  
 Signature of Notary Public



Seal  
 Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_