

STATE OF INDIANA     )  
                                  ) SS:  
COUNTY OF MARION    )

BEFORE THE INDIANA  
COMMISSIONER OF INSURANCE  
  
CAUSE NO: 21497-AG22-0523-089

IN THE MATTER OF:

Joseph Don Anderson  
201 Hooton Blvd., Apt. 7  
Madison, IN 47250

Applicant.

Type of Agency Action: Enforcement

License Application #: 965789

**FILED**

**JUN 30 2022**

STATE OF INDIANA  
DEPT. OF INSURANCE

**FINAL ORDER**

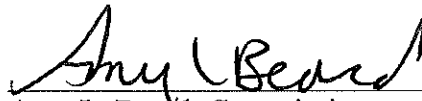
The Enforcement Division of the Indiana Department of Insurance (“Department”), by counsel, Samantha Aldridge, and Joseph Don Anderson (“Applicant”), a resident producer applicant, signed an Agreed Entry which purports to resolve all issues involved in the above-captioned cause number, and which has been submitted to the Commissioner of the Indiana Department of Insurance (“Commissioner”) for approval.

The Commissioner, after reviewing the Agreed Entry, which grants Applicant resident producer license on a probationary basis for two (2) years, during which time Applicant will be required to submit a list of appointments to the Department every six (6) months, due to Applicant’s February 15, 2011 Class D Felony conviction for Dealing in Marijuana, February 15, 2011 Class D Felony conviction for Maintaining a Common Nuisance, February 15, 2011 Class C Felony conviction for Possession of Marijuana, and November 28, 2001 Class D Felony conviction for Possession of Marijuana over thirty (30) grams, 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 as follows:

1. Applicant shall be granted a resident insurance producer license. Applicant's resident producer license shall be placed on probation for a period of two (2) years beginning the date the Commissioner signs this Final Order.
2. During the probationary period, any violations of Title 27 of the Indiana Code will result in the Department seeking immediate revocation of Applicant's license.
3. During the probationary period, Applicant 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).

6/30/22  
Dated

  
\_\_\_\_\_  
Amy L. Beard, Commissioner  
Indiana Department of Insurance

Distribution:

Samantha Aldridge, Attorney  
ATTN: Gina Davies, Investigator  
**INDIANA DEPARTMENT OF INSURANCE**  
311 West Washington Street, Suite 103  
Indianapolis, Indiana 46204-2787

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