

AUG 16 2016

STATE OF ARIZONA

DEPARTMENT OF INSURANCE

DEPT OF INSURANCE
BY MS

In the Matter of:

YORK, MICHAELA ANN,
(Arizona License # 1112032)
(National Producer # 17599215)

Respondent

No. 16A-034-INS

CONSENT ORDER

The State of Arizona Department of Insurance ("Department") has received evidence that **MICHAELA ANN YORK** has violated provisions of Title 20, Arizona Revised Statutes ("A.R.S."). Respondent wishes to resolve this matter without the commencement of formal proceedings, and admits the following Findings of Fact are true and consents to entry of the following Conclusions of Law and Order.

FINDINGS OF FACT

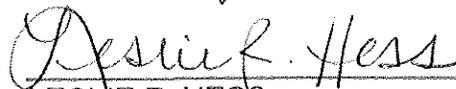
1. Michaela Ann York, ("Respondent") is and was at all material times licensed as an accident/health and life insurance producer, Arizona license number 1112032, which expires June 30, 2018.

2. Respondent's addresses of record with the Department are: 55 North 225th Drive, Buckeye, AZ 85326 (business and residence).

3. On or about May 26, 2015, the Department issued to Respondent an insurance license as an accident/health and life insurance producer, Arizona license number 1112032.

4. On November 10, 2015, the Department notified Respondent by mail at her address of record that her fingerprint card had been processed and returned by the Arizona Department of Public Safety (DPS) as illegible. The Department requested a replacement set of fingerprints along with a completed "Illegible Fingerprint Replacement Form" on or before December 9, 2015. Respondent did not reply to the Department's request.

1 DATED AND EFFECTIVE this 16th day of August, 2016.

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4 LESLIE R. HESS

Interim Director of Insurance

5 **CONSENT TO ORDER**

6 1. Respondent has reviewed the foregoing Findings of Fact, Conclusions of Law
7 and Order.

8 2. Respondent admits to the jurisdiction of the Director of Insurance, State of
9 Arizona, and admits the foregoing Findings of Fact and consents to the entry of the foregoing
10 Conclusions of Law and Order.

11 3. Respondent is aware of her right to notice and a hearing at which she may be
12 represented by counsel, present evidence and examine witnesses. Respondent irrevocably
13 waives her right to such notice and hearing and to any court appeals relating to this Consent
14 Order.

15 4. Respondent states that no promise of any kind or nature whatsoever, except as
16 expressly contained in this Consent Order, was made to her to induce her to enter into this
17 Consent Order and that she has entered into this Consent Order voluntarily.

18 5. Respondent acknowledges that the acceptance of this Consent Order by the
19 Director is solely to settle this matter against her and does not preclude any other agency,
20 officer, or subdivision of this state including the Department from instituting civil or criminal
21 proceedings as may be appropriate now or in the future not related to this matter.

22 6. Respondent acknowledges that this Consent Order is an administrative action
23 that the Department will report to the National Association of Insurance Commissioners

1 (NAIC). Respondent further acknowledges that she must report this administrative action to
2 any and all states in which she holds an insurance license and must disclose this
3 administrative action on any license application.

4 7/28/16
5 Date

4 Michaela a. York
5 MICHAELA ANN YORK, Arizona License # 1112032

6 **COPIES** of the foregoing mailed/delivered
7 this 16th day of August, 2016, to:

8 Michaela Ann York
9 55 North 225th Drive
10 Buckeye, Arizona 85326
11 Respondent

10 Mary Kosinski, Executive Assistant for Regulatory Affairs
11 Steven Fromholtz, Assistant Director, Consumer Protection
12 Arizona Department of Insurance
13 2910 North 44th Street, Suite 210
14 Phoenix, Arizona 85018

13 **E-FILE** of the foregoing delivered
14 electronically, same date, to:

15 Dorinda Lang, Administrative Law Judge
16 Office of Administrative Hearings

16 **COPY** sent same date via electronic mail to:

17 Liane Kido
18 Assistant Attorney General
19 Liane.Kido@azag.gov and Teresa.Carranza@azag.gov
20 Attorney for the Department of Insurance

20 Maidene Scheiner
21 Madeine Scheiner
22 5132253
23