

MISSISSIPPI INSURANCE DEPARTMENT
501 N. WEST STREET, SUITE 1001

WOOLFOLK BUILDING JACKSON, MISSISSIPPI 39201

www.doi.state.ms.us

MAILING ADDRESS
Post Office Box 79
Jackson, Mississippi 39205-0079
TELEPHONE: (601) 359-3569
FAX: (601) 359-2474
WATS: 1-800-562-2957 (Incoming - USA)

MIKE CHANEY Commissioner of Insurance State Fire Marshal

CONSENT TO ADMINISTRATIVE PENALTY

STATE OF MISSISSIPPI COUNTY OF HINDS

I, Donald Pugh, having been fully advised of charges of alleged violations of Miss. Code Ann. §83-39-7; 83-39-15; and 83-39-17 (Supp. 2006) and Mississippi Department of Insurance Regulation 95-101, and the proposed action against me, and understanding that I am entitled to a hearing before the Commissioner of Insurance of the State of Mississippi to determine the reasonableness of the Commissioner's action, do hereby waive the right to a hearing and voluntarily consent to the imposition of an administrative penalty as follows:

Imposition of an administrative penalty in the sum of Ten Thousand Dollars (\$10,000.00). I understand that should another Order of Forfeiture be received by the Department and not set aside within the ten (10) day statutory period, the result may be forfeiture of my license and/or a Ten Thousand Dollar (\$10,000) fine.

This Consent to Administrative Penalty is being entered into in lieu of other possible administrative action by the Mississippi Department of Insurance.

DONALD PUGH