



**DEPARTMENT OF INSURANCE, FINANCIAL  
INSTITUTIONS AND PROFESSIONAL REGISTRATION**

P.O. Box 690, Jefferson City, Mo. 65102-0690

In Re:           MICHAEL RETTKE           )           File No. 114437(e)  
  )             
  )             
  )           

**VOLUNTARY LICENSE SURRENDER  
ORDER**

This Voluntary Surrender Order acknowledges that the Missouri Department of Insurance, Financial Institutions and Professional Registration has received the voluntary surrender of, Michael Rettke, License Number PR 8048897 on October 29, 2010.

**SO ORDERED, SIGNED AND OFFICIAL SEAL AFFIXED THIS <sup>14</sup>15 DAY OF  
NOVEMBER, 2010.**

GOLD SEAL

A handwritten signature in black ink, appearing to read "John M. Huff".

JOHN M. HUFF, Director  
Missouri Department of Insurance,  
Financial Institutions and  
Professional Registration

# STATE OF MISSOURI

RECEIVED  
OCT 29 2010  
DEPT OF INSURANCE,  
INSTITUTIONS &  
REGISTRATION



## DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

P.O. Box 690, Jefferson City, Mo. 65102-0690

### VOLUNTARY LICENSE SURRENDER FORM

I, Michael Rettke, hereby surrender my producer license, PR8048897 to the Missouri Department of Insurance, Financial Institutions and Professional Registration ("Department"). I understand the Department will report this action to the National Association of Insurance Commissioners. I also understand all fees paid to the Department will not be refunded. My original producer license is enclosed.

10/27/10  
\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
SIGNATURE

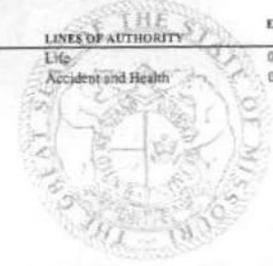
Return to:

E.J. Jackson, Special Investigator  
Department of Insurance, Financial  
Institutions and Professional Registration  
P. O. Box 690  
Jefferson City, MO 65102

File #111733

License No: 8048897      State of Missouri Insurance License      NPN: 4954441  
**MICHAEL RETTKE**

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	LICENSE EXPIRATION DATE
Producer	Life Accident and Health	05/25/2010	05/25/2012



**MICHAEL RETTKE**  
 58 N CEDAR LAKE  
 COLUMBIA MO 65203

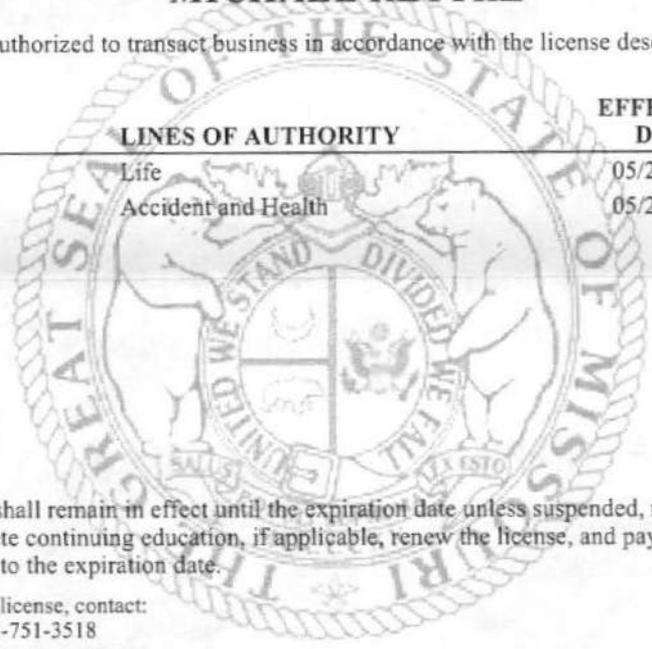
License No: 8048897

State of Missouri  
 Insurance License  
**MICHAEL RETTKE**

NPN: 4954441

Is hereby authorized to transact business in accordance with the license description below:

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	LICENSE EXPIRATION DATE
Producer	Life Accident and Health	05/25/2010 05/25/2010	05/25/2012



This insurance license shall remain in effect until the expiration date unless suspended, revoked or forfeited. The individual must complete continuing education, if applicable, renew the license, and pay fees as required by Missouri Statutes prior to the expiration date.

For questions regarding a license, contact:  
 MO DIFP - Insurance 573-751-3518  
 or E-mail: [licensing@insurance.mo.gov](mailto:licensing@insurance.mo.gov)  
<http://www.insurance.mo.gov>