

DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

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

IN RE: KATE SHAN, INC DBA CAPITAL INSURANCE & ASSOCIATES PO BOX 1779 CAPE GIRARDEAU, MO 63702-1779

TRACKING ID 310934

VOLUNTARY FORFEITURE AGREEMENT

It is hereby agreed by Kate Shan, Inc. dba Capital Insurance & Associates and the Division of Consumer Affairs ("Division") of the Department of Insurance, Financial Institutions and Professional Registration, as follows:

WHEREAS, Chlora Lindley-Myers, is the duly appointed Director of the Department of Insurance, Financial Institutions and Professional Registration, State of Missouri (hereinafter, "Director" of the "Department"), whose duties, pursuant to Chapters 374 and 375, RSMo, include the supervision and regulation of the business of insurance;

WHEREAS, the Division is charged with investigating producers and companies engaged in the business of insurance pursuant to Sections 374.085 and 374.190, RSMo and is authorized by the Director to recommend enforcement action under the laws relating to insurance; WHEREAS, Kate Shan, Inc. dba Capital Insurance & Associates ("Capital Insurance & Associates") has a resident business entity producer license with the Department, pursuant to Chapter 375, RSMo;

WHEREAS, the Division has received information concerning Capital Insurance & Associates' failure to timely refund premium money on at least two separate occasions, which is a violation of Section 375.144(4), RSMo (Supp. 2013) and subjects Capital Insurance & Associates to enforcement action by the Director;

WHEREAS, Capital Insurance & Associates has been informed of its right to counsel and of its right to contest any attempt by the Department to revoke its insurance producer license, and states that it understands its rights to contest any such actions;

AND WHEREAS, Capital Insurance & Associates acknowledges and admits for purposes of this Agreement and for purposes of any future action by the Director or the Division based on an additional violation of the insurance laws or regulations by Capital Insurance & Associates, in which action the Director or the Division alleges that the violation described herein forms part of a course of conduct, a business practice, or other such series of similar violations, or that future violations by Capital Insurance & Associates are committed knowingly, intentionally or in conscious disregard of the law, that it failed to timely refund premium money on at least two occasions, and that such conduct violated Section 375.144(4), RSMo;

NOW, THEREFORE, in lieu of any recommendation or initiation by the Division of any action based on the violation cited in this Agreement, and after being afforded the opportunity to consult legal counsel, Capital Insurance & Associates does hereby voluntarily and knowingly surrender and forfeit the sum of \$250.00 (two hundred fifty dollars), such sum to be paid into the State School Moneys Fund pursuant to Sections 374.046 and 374.280, RSMo.

Capital Insurance & Associates shall submit this sum to the Department by cashier's check or money order made payable to the State School Moneys Fund no later than April 2, 2018.

The parties agree that, should the Director or the Division in the future allege a different violation of the insurance laws or regulations by Capital Insurance & Associates, nothing in this Agreement shall preclude the Director or the Division from introducing Capital Insurance & Associates' admissions contained in this Agreement as evidence that the acts described herein form part of a course of conduct, a business practice, or other such series of similar violations, or for purposes of showing that such later alleged acts are committed knowingly, intentionally or in conscious disregard of the law.

DATED: 8/19/18

3/28/18 DATED:

DATED: 3128.2018

1 associato maner Associates Capital Insurance & hen

Its: License No. 8021028

Carrie Couch, Director Division of Consumer Affairs

Chlora Lindley-Myers, Director Department of Insurance, Financial Institutions and Professional Registration

Return original to: Karen Crutchfield Missouri Department of Insurance, Financial Institutions and Professional Registration PO Box 4001 Jefferson City, MO 65102