

DEPARTMENT OF INSURANCE, FINANCIAL ECT INSTITUTIONS AND PROFESSIONAL REGISTRATION 28 2011

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

MO. DEPT OF INSURANCE, FINANCIAL INSTITUTIONS & PROFESSIONAL REGISTRATION

## VOLUNTARY LICENSE SURRENDER FORM

I, Amerika N. Stacy, hereby surrender my producer license, PR0348556 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 not available and is not enclosed.

March 19,20\$

DATE

SIGNATURE

Return to:

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

File #110911



## DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

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

In Re:	Amerika N. Stacy	)	File No. 110911c
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## 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, Amerika N. Stacy's license, License Number PR0348556 on March 28, 2011.

THIS 1871 DAY OF APPLICAL SEAL AFFIXED

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