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INSURANCE DEPARTMENT

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ADMIN HEARINGS OFFICE

BEFORE THE INSURANCE COMMISSIONER
OF THE
COMMONWEALTH OF PENNSYLVANIA

IN RE:	:	VIOLATIONS:
	:	
MARK I. LAMENDOLA	:	40 P.S. §§ 310.11(4), (7), (17)
104 Brookshire Dr.	:	and (20)
Mars, PA 16046	:	
	:	
	:	
	:	
	:	
Respondent.	:	Docket No. CO18-08-004

CONSENT ORDER

AND NOW, this 6th day of November, 2018, this Order is hereby issued by the Insurance Department of the Commonwealth of Pennsylvania pursuant to the statutes cited above and in disposition of the matter captioned above.

1. Respondent hereby admits and acknowledges that he has received proper notice of his rights to a formal administrative hearing pursuant to the Administrative Agency Law, 2 Pa.C.S. § 101, et seq., or other applicable law.

2. Respondent hereby waives all rights to a formal administrative hearing in this matter, and agrees that this Consent Order, and the Findings of Fact and Conclusions of Law contained herein, shall have the full force and effect of an Order duly entered in accordance with the adjudicatory procedures set forth in the Administrative Agency Law, supra, or other applicable law.

FINDINGS OF FACT

3. The Insurance Department finds true and correct each of the following

Findings of Fact:

- (a) Respondent is Mark I. Lamendola, and maintains his address at 104 Brookshire Dr., Mars, PA 16046.
- (b) Respondent is, and at all times relevant hereto has been, a licensed resident producer.
- (c) On or about April 14, 2014, Respondent received a check from a customer, who is an insurance client of Respondent, which was intended for deposit into the customer's deferred fixed-indexed annuity IRA account at National Life Insurance Company of the Southwest.
- (d) Respondent wrote an account number for a deferred variable annuity Roth IRA account through American General Life Insurance Company (AGL) on the check and deposited the check in the customer's AGL account on July 14, 2014.
- (e) On or about April 10, 2015, Respondent received a check dated April 10, 2015, which was intended for deposit into the customer's deferred fixed-indexed annuity IRA account at National Life Insurance Company of the Southwest.

- (f) Respondent wrote "Rollover" and the AGL account number for the deferred variable annuity Roth IRA account on the check and deposited the check in the customer's AGL account on April 27, 2015.
- (g) Respondent failed to take action to have the deposits reversed and sent to the intended account at National Life Insurance Company of the Southwest, but rather told AGL that the customer rolled some money into the Roth IRA, which was intended for a Traditional IRA, and wished to open a new Traditional IRA at AGL.
- (h) After the customer discovered the error, Respondent sent the customer letters dated January 31, 2015 and June 8, 2015 misrepresenting that the aforementioned checks had been deposited into the customer's annuity IRA at National Life Insurance Company of the Southwest when in fact the deposits remained in the AGL accounts.
- (i) Additionally, Respondent fabricated AGL letterheads and sent the customer letters dated October 16, 2015 and January 22, 2016, appearing to be from AGL, that falsely confirmed that the two (2) aforementioned deposits had been re-deposited into the correct accounts.
- (j) Respondent, during an interview with the Department on July 11, 2018, admitted he knew the two (2) checks were intended to be deposited into the customer's accounts at National Life Insurance Company of the Southwest, but due to his termination from Equity Services Incorporated

on November 25, 2013, he no longer had access to that account.

Respondent admitted that he created and sent the aforementioned four (4) letters to pacify the customers.

CONCLUSIONS OF LAW

4. In accord with the above Findings of Fact and applicable provisions of law, the Insurance Department concludes and finds the following Conclusions of Law:

- (a) Respondent is subject to the jurisdiction of the Pennsylvania Insurance Department.
- (b) 40 P.S. § 310.11(4) prohibits producers from improperly withholding, misappropriating, or converting money or property received in the course of doing business.
- (c) Respondent's activities described above in paragraphs 3(c) through 3(j) constitute improperly withholding, misappropriating, or converting money or property received in the course of doing business, in violation of 40 P.S. § 310.11(4).
- (d) 40 P.S. § 310.11(7) prohibits a licensee or an applicant from using fraudulent, coercive or dishonest practices or demonstrating

incompetence, untrustworthiness or financial irresponsibility in the conduct of doing business.

- (e) Respondent's activities described above in paragraphs 3(c) through 3(j) violate 40 P.S. § 310.11(7).
- (f) 40 P.S. § 310.11(17) prohibits a licensee or an applicant from committing fraud, forgery, dishonest acts or an act involving a breach of fiduciary duty.
- (g) Respondent's activities described above in paragraphs 3(c) through 3(j) violate 40 P.S. § 310.11(17).
- (h) 40 P.S. § 310.11(20) prohibits a licensee or an applicant from demonstrating a lack of general fitness, competence or reliability sufficient to satisfy the Department that the licensee is worthy of licensure.
- (i) Respondent's activities described above in paragraphs 3(c) through 3(j) violate 40 P.S. § 310.11(20).
- (j) Respondent's violations of §§ 310.11(4), (7), (17) and (20) are punishable by the following, under 40 P.S. § 310.91:

- (i) suspension, revocation or refusal to issue the license;
- (ii) imposition of a civil penalty not to exceed five thousand dollars (\$5,000.00) for every violation of the Act;
- (iii) an order to cease and desist; and
- (iv) any other conditions as the Commissioner deems appropriate.

ORDER

5. In accord with the above Findings of Fact and Conclusions of Law, the Insurance Department orders and Respondent consents to the following:

- (a) Respondent shall cease and desist from engaging in the activities described herein in the Findings of Fact and Conclusions of Law.
- (b) All licenses of Respondent to do the business of insurance are hereby revoked.
- (c) If Respondent should ever become licensed in the future, his licenses may be immediately suspended by the Department following its investigation and determination that (i) any terms of this Order have not been complied with, or (ii) any complaint against Respondent is accurate and a statute or regulation has been violated. The Department's right to act under this

section is limited to a period of ten (10) years from the date of issuance of such licenses.

- (d) Respondent specifically waives his right to prior notice of said suspension, but will be entitled to a hearing upon written request received by the Department no later than thirty (30) days after the date the Department mailed to Respondent by certified mail, return receipt requested, notification of said suspension, which hearing shall be scheduled for a date within sixty (60) days of the Department's receipt of Respondent's written request.
- (e) At the hearing referred to in paragraph 5(d) of this Order, Respondent shall have the burden of demonstrating that he is worthy of an insurance license.
- (f) In the event Respondent's licenses are suspended pursuant to paragraph 5(c) above, and Respondent either fails to request a hearing within thirty (30) days or at the hearing fails to demonstrate that he is worthy of a license, Respondent's suspended licenses shall be revoked.

6. In the event the Insurance Department finds that there has been a breach of any of the provisions of this Order, based upon the Findings of Fact and Conclusions

of Law contained herein, the Department may pursue any and all legal remedies available, including but not limited to the following: The Department may enforce the provisions of this Order in an administrative action pursuant to the Administrative Agency Law, supra, or other relevant provisions of law; or, if applicable, the Department may enforce the provisions of this Order in any other court of law or equity having jurisdiction.

7. Alternatively, in the event the Insurance Department finds there has been a breach of any of the provisions of this Order, the Department may declare this Order to be null and void and, thereupon, reopen the entire matter for appropriate action pursuant to the Administrative Agency Law, supra, or other relevant provision of law.

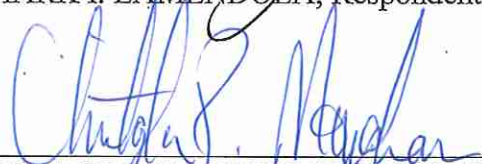
8. In any such enforcement proceeding, Respondent may contest whether a breach of the provisions of this Order has occurred but may not contest the Findings of Fact and Conclusions of Law contained herein.

9. Respondent hereby expressly waives any relevant statute of limitations and application of the doctrine of laches for purposes of any enforcement of this Order.

10. This Order constitutes the entire agreement of the parties with respect to the matters referred to herein, and it may not be amended or modified except by an amended order signed by all the parties hereto.

11. This Order shall be final upon execution by the Insurance Department. Only the Insurance Commissioner or a duly authorized delegee is authorized to bind the Insurance Department with respect to the settlement of the alleged violations of law contained herein, and this Consent Order is not effective until executed by the Insurance Commissioner or duly authorized delegee.


BY: 
MARK I. LAMENDOLA, Respondent


COMMONWEALTH OF PENNSYLVANIA
By: CHRISTOPHER R. MONAHAN
Deputy Insurance Commissioner

BEFORE THE INSURANCE COMMISSIONER
OF THE
COMMONWEALTH OF PENNSYLVANIA

IN RE: The Act of April 9, 1929, P.L. 177, No. 175, known as The
Administrative Code of 1929

AND NOW, this 28th day of March, 2018, Christopher R. Monahan,
Deputy Insurance Commissioner, is hereby designated as the Commissioner's duly
authorized representative for purposes of entering in and executing Consent Orders. This
delegation of authority shall continue in effect until otherwise terminated by a later Order
of the Insurance Commissioner.



Jessica K. Altman
Insurance Commissioner

