



Illinois Department of Financial and Professional Regulation
Division of Insurance

ROD R. BLAGOJEVICH
Governor

DEAN MARTINEZ
Secretary

October 5, 2006

MICHAEL T. McRAITH
Director
Division of Insurance

Cecilia Carlos
1421 N. Green Trails Dr.
Plainfield, Illinois 60586

Re: Request for License

Dear Ms. Carlos:

This letter is in response to your request to obtain a license. The Division of Insurance received your insurance producer license application on July 14, 2006. A copy of your validated application is enclosed with this letter. Section 500-30 of the Illinois Insurance Code (215 ILCS 5/500-30) requires, in part, “. . . before approving the application, the Director must find that the individual . . . has not committed any act that is a ground for denial, suspension, or revocation set forth in Section 500-70 of the Illinois Insurance Code (215 ILCS 5/500-70).”

On July 14, 2006 the Division of Insurance received your insurance producer license application. Question #1 asked, “Have you been convicted of a felony?” You answered this question “Yes.”

On June 2, 2005 you were convicted of Retail Theft/Display Merchandise, Felony in the Circuit Court of Cook County, Illinois to Case Number 05C44051301.

You were sentenced to eighteen (18) months probation which terminates on December 1, 2006.

By the above action, you have been convicted of a felony which is a ground for denial pursuant to Section 500-70(a)(6) of the Illinois Insurance Code (215 ILCS 5/500-70(a)(6)).

Your request for a license is being denied based upon the information previously stated.

If you wish a refund of your application fee, return the copy of the validated application with a letter asking for a refund to the Division to the attention of David Murphy, Licensing Supervisor, Illinois Department of Financial and Professional Regulation, Division of Insurance, 320 West Washington Street, Springfield, Illinois 62767-0001.

You have the right to a formal hearing on this matter if your written request is filed with the Division within 30 days of the date of mailing of this correspondence.

Enclosure:

Sincerely,
Michael T. McRaith

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Michael T. McRaith
Director of Insurance

Tea:510

320 W. Washington
Springfield, Illinois 62767-0001
www.idfpr.com