

**Kelly, Nicole (OIC)**

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**From:** Estrada, Vicki (OIC)  
**Sent:** Monday, November 29, 2010 11:42 AM  
**To:** Kelly, Nicole (OIC)  
**Cc:** Hamje, John (OIC)  
**Subject:** FW: Finger Print Card 124494

FILED

2010 NOV 29 A 11:42

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Hearings Unit, DIC  
Patricia D. Petersen  
Chief Hearing Officer

For action.

Vicki

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**From:** Baughman, Jeff (OIC)  
**Sent:** Monday, November 29, 2010 11:34 AM  
**To:** 'Calvin Rooks'  
**Cc:** [pwhitfield@earthlink.net](mailto:pwhitfield@earthlink.net); Philhower, Andrea (OIC); Estrada, Vicki (OIC)  
**Subject:** RE: Finger Print Card 124494

Mr. Rooks;

I will forward your request for a hearing to John Hamje, Deputy Insurance Commissioner.

Thanks,

Jeff Baughman  
Licensing & Education Program Manager  
Office of the Insurance Commissioner  
State of Washington  
(360) 725-7156

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**From:** Calvin Rooks [<mailto:crooks@clearwire.net>]  
**Sent:** Monday, November 29, 2010 11:28 AM  
**To:** Baughman, Jeff (OIC)  
**Cc:** [pwhitfield@earthlink.net](mailto:pwhitfield@earthlink.net)  
**Subject:** Re: Finger Print Card 124494

Yes Jeff, I choose to have a hearing. You haven't even had enough courage or consideration to talk to me in person or phone. This is your first and only response. I will present myself before you and whoever and show what I am made of, because you have harmed me with your prejudice by denying me a job I am well qualified for. Bring your most awful witch hunters too.

Thank you,

Cal Rooks

On Thu, Nov 18, 2010 at 2:40 PM, <[JeffB@oic.wa.gov](mailto:JeffB@oic.wa.gov)> wrote:  
Mr. Rooks; The application which you have submitted for a Washington resident/non-resident insurance license has been denied on the basis of background information provided. The decision to deny your request for a license is based upon RCW 48.17.530(1)(f) and (h). You are entitled to a refund of your license application

fees. A refund request will be submitted on your behalf. You should receive your mailed refund within 3-6 weeks of the date of this letter. You have the right to demand a hearing to contest this decision. During this hearing, you can present your argument that the decision should not have been entered for legal and/or factual reasons and/or to explain the circumstances surrounding the activities which are the subject of this decision. You may be represented by an attorney if you wish, although it is not required. In many hearings before this agency parties do choose to represent themselves without an attorney. Your Demand for Hearing must be made within 90 days after the date of this decision, which is the date of mailing, or your Demand will be invalid and this decision will stand. Your Demand for Hearing should be sent to John F. Hamje, Deputy Insurance Commissioner, Office of the Insurance Commissioner, P.O. Box 40257, Olympia, WA 98504-0257, and must briefly state how you are harmed by this decision and why you disagree with it. You will then be notified both by telephone and in writing of the time and place of your hearing. If you have questions concerning filing a Demand for Hearing or the hearing process, please telephone the Hearings Unit, Office of the Insurance Commissioner, at 360/725-7002.