

FILED

BEFORE THE STATE OF WASHINGTON
OFFICE OF INSURANCE COMMISSIONER

2012 NOV -6 A 11:10

In the Matter of
SAM Y. CHAN,
Licensee.

Docket No. 12-0103

**OIC MOTION TO SUPPLEMENT
THE RECORD** Chief Hearing Officer

The Office of the Insurance Commissioner ("OIC") moves for permission to supplement the record with brief additional testimony from and exhibits concerning licensee Sam Y. Chan, based on newly discovered evidence of a past criminal charge under a former name. This motion is supported and accompanied by the declaration of Christine Tribe.

During the second day of the hearing in this matter, Mr. Chan was asked about his 2008 conviction involving his false stolen truck claim to Renton Police and his subsequent conviction and deferred judgment related thereto. At 3:07:35 into the recording of the second day, Mr. Chan was asked the following question, and gave the following answer:

Q: Do you have, aside from this deferred judgment, any other, ah, criminal charges that were filed against you?

A: Not that I know of.

Mr. Chan was asked whether he had any other criminal charges brought against him, and his answer clearly suggested there were none. On the third, and last, day of the hearing, OIC staff attempted to inquire into a number of court cases that appeared to involve Mr. Chan. When Mr. Chan's counsel objected, OIC staff indicated it would conduct additional investigation into these cases and bring any relevant information forward if any was discovered.

After the conclusion of the last day of the hearing, OIC discovered that Mr. Chan was in fact involved in a name change action in 2004. From this OIC learned that, before 2004, Mr. Chan apparently had a different legal name – not the one he used when he applied to become licensed with OIC in 2000. When OIC staff then searched for records of court cases

1 under Mr. Chan's pre-2004 legal name, it was then discovered that Mr. Chan in fact had
2 previously been charged with a different crime, assault, under his prior legal name. It is
3 unclear why Mr. Chan became a licensed insurance producer (agent) in 2000 under his current
4 name, when he did not undergo the name change action in the King County District Court
5 until 2004. But once OIC learned of Mr. Chan's former identity, OIC then discovered the
6 prior criminal charge, which Mr. Chan failed to mention during his earlier testimony.

7 Mr. Chan's testimony and the relevant, recently discovered documents are necessary
8 to properly judge his credibility and trustworthiness, including to also address the issue of his
9 application to OIC in other than his legal name, his use of a different name, legal names he
10 has done business under before, and the reasons for his name change, as well as his true prior
11 criminal history. The presiding officer's overarching authority to "regulate the course of
12 proceedings" necessarily includes the discretion to allow the taking of such evidence as no
13 final decision or order has yet been entered. *See* RCW 34.05.449. Here, Mr. Chan should
14 appear to address these additional questions as he is the licensee this matter concerns, and the
15 matters arose only because he failed or refused to earlier disclose the information. Had Mr.
16 Chan provided true, correct and complete answers to questions, Mr. Chan's further testimony
17 might not be required. But since Mr. Chan's incomplete and incorrect assertions caused OIC
18 to only just recently discover and learn of this relevant information, it should be allowed.

19 DATED this 6th day of November, 2012.

20 OFFICE OF INSURANCE COMMISSIONER

21 By: 
22 Alan Michael Singer
23 Staff Attorney
Legal Affairs Division

1 **CERTIFICATE OF SERVICE**

2 The undersigned certifies under the penalty of perjury under the laws of the State of
3 Washington that on the date given below I caused to be served the foregoing OIC MOTION
4 TO SUPPLEMENT THE RECORD and the subjoined DECLARATION OF CHRISTINE
5 TRIBE on the following individuals in the manner indicated:

6
7 Ronald J. Meltzer
8 Sinsheimer & Meltzer, Inc., P.S.
9 4780 Columbia Center
10 701 Fifth Avenue
11 Seattle, WA 98104
12 (XXX) Via Depositing in the US Mail
13 (XXX) Via Email (RJM@sinsheimer-meltzer.com)
14 () Via Legal Messenger

11
12 Kelly Cairns
13 Office of Insurance Commissioner
14 5000 Capitol Blvd
15 Tumwater, WA 9850_
16 (XXX) Via Hand Delivery
17 (XXX) Via Email (KellyC@oic.wa.gov)

18
19
20
21
22
23
SIGNED this 4th day of November, 2012, at Tumwater, Washington.

Christine Tribe

Christine Tribe

BEFORE THE STATE OF WASHINGTON
OFFICE OF INSURANCE COMMISSIONER

FILED

In the Matter of

Docket No. 12-0103

2012 101 -6 7:11:20

SAM Y. CHAN,

**DECLARATION OF CHRISTINE
TRIBE**

Licensee.

Heather L. Peterson
Field and District Director
Chief Hearing Officer

I, Christine Tribe, state and declare as follows:

1. My name is Christine Tribe. I am employed by the Washington State Office of the Insurance Commissioner (herein "OIC"). My job title is Paralegal. Part of my job responsibilities includes assisting and working with staff attorneys. One such staff attorney is Alan Singer. I make this Declaration based on personal knowledge. I am over the age of eighteen (18) years. I am competent and authorized to testify to the matters set forth herein.

2. On October 29 and 30, 2012, Alan and I went through a list of Washington court cases for Sam Y. Chan, and I helped contact courts to learn more about each of the cases. A true and correct copy of this two-page printout is attached and incorporated herein as "Exhibit A." I discovered that one of the cases -- which appears as case number Y4-007872, first on the list attached at Exhibit A -- was a 2004 King County civil name change case. It concerned someone who changed their name from Chak Yee Chan to Sam Yee Chan, but it provided no date of birth or information to indicate whether the Sam Y. Chan apparently involved was the same one as licensee Sam Y. Chan.

3. Alan later conducted a Washington courts case search for Chak Yee Chan. That search identified two cases -- one was the 2004 King County civil name change case under case number Y4-007872, and the other was a Sunnyside Municipal Court criminal case from 1995, case number 47167. Alan contacted the Sunnyside Municipal Court about the criminal case concerning defendant Chak Yee Chan and we learned that the defendant faced an assault charge, but that the only case information they still had would be a printout of the court's

1 docket entries. On October 31, we received a faxed copy of the docket from the court, which
2 indicates that the defendant in Sunnyside Municipal Court case number 47167 appears to
3 share the same birthday as licensee Sam Y. Chan, April 29, 1976. A true and correct copy of
4 the two-page docket we received from the Sunnyside Municipal Court criminal case from
5 1995, case number 47167, is attached and incorporated herein as "Exhibit B."

6 4. We also attempted to learn more about the 2004 King County civil name change case
7 under case number Y4-007872. We contacted the court to ask about getting a copy of the
8 case documents in the court's files and records, but we were told that the only case
9 information they still had would be a printout of the court's docket entries. On November 1
10 we received a copy of that docket printout in the mail. A true and correct copy of the three-
11 page docket we received from the King County District Court case from 2004, case number
12 Y4-007872, is attached and incorporated herein as "Exhibit C."

13 5. After learning the foregoing about Mr. Chan, Alan retrieved a copy of his 2000
14 application to OIC. In it, for the line "Previous name if name change," Mr. Chan wrote "Chan
15 Chak Yee." A true and correct copy of Mr. Chan's 11-page 2000 application and affiliated
16 documents kept as one document in the OIC's licensing records database, "SIMBA," is
17 attached and incorporated herein as "Exhibit D."

18 I declare under penalty of perjury under the laws of the State of Washington that the
19 foregoing is true and correct.

20 EXECUTED this 6th day of November, 2012 at Tumwater,
21 Washington.

22 Christine Tribe
23 Christine Tribe

NOVEMBER 6, 2012 DECLARATION OF CHRISTINE TRIBE

EXHIBIT A



Courts Home | Search Case Records

Search | Site Map | eService Center

Home | Summary Data & Reports | Resources & Links | Get Help

Search Results

Directions:

- ▶ Click on a highlighted name to get docket information for this case.
- ▶ The court of record must be contacted for verification and any further information.

There are 8 names that match your search criteria.

Name	Court	Case Number	Judgment Record	Court Information
1 Chan, Sam Yee New Name	Kcdc-so Div (swd)	Y4-007872		06-03-2004
2 Chan, Sam Yee Defendant	King County District	XY0564337	Traffic	12-02-2010
3 Chan, Sam Yee Defendant	King County District	I06417774	Traffic	01-18-2011
4 Chan, Sam Yee Defendant	King County District	IS0186944		01-25-2007
5 Chan, Sam Yee Defendant	King County District	BI0785707	Traffic	03-11-2010
6 Chan, Sam Yee Defendant	Renton Municipal	CR0042207		04-10-2008
7 Chan, Sam Yee Defendant	Cowlitz District	2Z0447721	Traffic	06-14-2012
8 Chan, Samuel Yan-ho Defendant	Tukwila Municipal	47730		04-07-1986

About Lists of Names

About Name List

These are the names that the search tool found from the information you entered.

Disclaimer

What is this website? It is an index of cases filed in the municipal, district, superior, and appellate courts of the state of Washington. This index can point you to the official or complete court record.

How can I obtain the complete court record? You can contact the court in which the case was filed to view the court record or to order copies of court records.

How can I contact the court? Click [here](#) for a court directory with information on how to contact every court in the state.

Can I find the outcome of a case on this website? No. You must consult the local or appeals court record.

How do I verify the information contained in the index? You must consult the

court record to verify all information.

Can I use the index to find out someone's criminal record?

No. The Washington State Patrol (WSP) maintains state criminal history record information. Click [here](#) to order criminal history information.

Where does the information in the index come from?

Clerks at the municipal, district, superior, and appellate courts across the state enter information on the cases filed in their courts. The index is maintained by the Administrative Office of the Court for the State of Washington.

Do the government agencies that provide the information for this site and maintain this site:

- ▶ **Guarantee that the information is accurate or complete?**
NO
- ▶ **Guarantee that the information is in its most current form?**
NO
- ▶ **Guarantee the identity of any person whose name appears on these pages?**
NO
- ▶ **Assume any liability resulting from the release or use of the information?**
NO

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NOVEMBER 6, 2012 DECLARATION OF CHRISTINE TRIBE

EXHIBIT B

ID7020SX DXM
07/31/2012 8:05 AM

SUNNYSIDE MUNICIPAL COURT
D O C K E T

PAGE: 1

DEFENDANT
CHAN, CHAK YEE
6119 SOUTH 240TH COURT 22203
KENT WA 98032

CASE 47167 SSD
Criminal Non Traffic
Agency No.

Home Phone: 2538131710

(KA No aliases on file.

OFFICER
08128 SSD COFFMAN, KENT

CHARGES
Violation Date: 03/22/1995 DV Plea Finding
1 9A.36.041 ASSAULT 4TH DEGREE N Dismissed

TEXT

S	03/23/1995	Case Filed on 03/23/1995 OFF 1 COFFMAN, KENT Added as Participant ARR Set for 03/23/1995 04:30 PM in Room 1 with Judge SLM		MRE
U		DEF ARRAIGNED. PLED NOT GUILTY. DOESN'T WANT ATTY. O.R. SET FOR PRE TRIAL.		DXM
S		ARR: Held		
	03/31/1995	Defendant Arraigned on Charge PTR Set for 04/04/1995 10:30 AM in Room 1 with Judge SLM		IMJ DXM
U	04/04/1995	Notice Issued for PTR on 04/04/1995 10:30 AM CONTINGE 6 MONTHS AND DISMISS IF GOOD BEHAVIOR AND)PAY \$100 COSTS 90 DAY WAIVER SIGNED		MRE DXM
S	04/05/1995	PTR: Held		
	04/05/1995	Accounts Receivable Created	100.00	
	04/06/1995	Case Scheduled on Time Pay Agreement 1 for:	100.00	
	04/27/1995	COMPLIANT Time Pay Statement Sent for Time Pay Agreement 1		SYS
	05/25/1995	DELINQUENT Time Pay Statement Sent for Time Pay Agreement 1		
	05/25/1995	98145100085 Time Payment Received	100.00	MRE
	09/26/1995	Case Paid in Full and Removed from Time Pay OTH DISM Set for 10/10/1995 10:30 AM in Room 1 with Judge SLM		DXM
	09/27/1995	Notice Issued for OTH DISM on 10/10/1995 10:30 AM		MRE
	10/10/1995	Charge 1 Dismissed : Oth Defrl Compl Case Disposition of CL Entered OTH DISM: Held		IMJ DXM

ACCOUNTING SUMMARY

	Total Due	Paid	Credit	Balance
Timepay: N	100.00	100.00		

ADDITIONAL CASE DATA
Case Disposition
Disposition: Closed Date: 10/10/1995

DD7020SX DXM
0/31/2012 8:05 AM

SUNNYSIDE MUNICIPAL COURT
D O C K E T

PAGE: 2

DEFENDANT
CHAN, CHAK YEE

CASE: 47167 SSD
Criminal Non Traffic
Agency No.

ADDITIONAL CASE DATA Continued

Personal Description

Sex: M Race: A DOB: 04/29/1976
Dr. Lic. No.: CHAN*CY240J9 State: WA Expires: 2004
Employer:
Height: 5 7 Weight: 195 Eyes: BRO Hair: BLK

Hearing Summary

Held	ARRAIGNMENT	ON 09/23/1995 AT 04:30 PM IN ROOM 1	WITH SLM
Held	PRE TRIAL CONFERENCE	ON 04/04/1995 AT 10:30 AM IN ROOM 1	WITH SLM
Held	DISMISSAL HEARING	ON 10/10/1995 AT 10:30 AM IN ROOM 1	WITH SLM

End of docket report for this case

NOVEMBER 6, 2012 DECLARATION OF CHRISTINE TRIBE

EXHIBIT C

D0030I Beginning of docket

DD1000PU

10/30/12 15:46:01

DD1000MU Case Docket Update (CDK)

KCDC-SO DIV (SWD)

JAW

Case: Y4-007872 CV Csh:

Ply: StID:

Name: NmCd:

Title: PETITION FOR CHANGE OF NAME FOR CHAK YEE CHAN

Note:

Case: Y4-007872 CV Civil

Print: N (Y/N)

S	06	03	2004	Case Filed on 06/03/2004	DXT
S				OLD 1 CHAN, CHAK YEE Added as Participant	DXT
S				NEW 1 CHAN, SAM YEE Added as Participant	DXT
S				MOT NAME Set for 06/04/2004 01:25 PM	DXT
S				in Room BU2 with Judge 2	DXT

CERTIFICATION - State of Washington, County of King.
 The undersigned duly authorized clerk of King County District
 Court, Washington, hereby Certifies that the document on
 which this stamp is imprinted is a true and correct copy of
 the original filed in the court.

SIGNED 10/30/2012 Seattle Dist Ct.
[Signature], Court Clerk

RECEIVED

NOV 01 2012

INSURANCE COMMISSIONER
LEGAL AFFAIRS DIVISION

D0071I More records available.

DD1000PU

10/30/12 15:51:27

DD1000MU Case Docket Update (CDK)

KCDC-SO DIV (SWD)

JAW

Case: Y4-007872 CV Csh:

Pty: _____ StID: _____

Name: _____

NmCd: _____

Title: PETITION FOR CHANGE OF NAME FOR CHAK YEE CHAN

Note:

Case: Y4-007872 CV Civil

Print: N (Y/N)

S	06	03	2004	4155100578	CIV FILING FEE Received	31.00	DXT
S					Paid by: CHAN, CHAK		DXT
S				4155100578	DISPUTE RES CV Received	10.00	DXT
S					Paid by: CHAN, CHAK		DXT
S				4155100578	NAME CHG AUDIT Received	19.00	DXT
S					Paid by: CHAN, CHAK		DXT
S				4155100578	NAME CHG ADMIN Received	10.00	DXT
S					Paid by: CHAN, CHAK		DXT
S				4155100578	CERTIFY DOC Received	15.00	DXT
S					Paid by: CHAN, CHAK		DXT
S	06	04	2004		MOT NAME: Not Held, Hearing Canceled		MYM

D0031I End of docket

DD1000FU

10/30/12 15:51:31

DD1000MU Case Docket Update (CDK)

KCDC-SO DIV (SWD)

JAW

Case: Y4-007872 CV Csh:

Pty: StID:

Name: NmCd:

Title: PETITION FOR CHANGE OF NAME FOR CHAK YEE CHAN

Note:

Case: Y4-007872 CV Civil

Print: N (Y/N)

S	06	04	2004	06/04/2004	MOT NAME Status Changed to Held			DXT
-	-	-	-	-	NAME CHANGE HEARING DISC 1285 COUNTER 2:39:09	MARY 2		DXT
-	-	-	-	-	JUDGE: CHRISTIE			DXT
-	-	-	-	-	PETITIONER PRESENT S & T			DXT
-	-	-	-	-	ORDER CHANGING NAME SIGNED BY COURT			DXT
-	-	-	-	-	CERTIFIED COPIES GIVEN TO PETITIONER OVER COUNTER			DXT
-	-	-	-	-	CERTIFIED COPY MAILED TO DEPARTMENT OF RECORDS AND ELECTIONS			DXT
-	-	-	-	-	FOR RECORDING			DXT
S	-	-	-	-	Case Disposition of CL Entered			DXT
S	-	-	-	-	Judgment 1 Granted entered by Judge DMC			DXT
S	-	-	-	-	Judgment 1 Disposition of CL Entered			DXT

NOVEMBER 6, 2012 DECLARATION OF CHRISTINE TRIBE

EXHIBIT D

Initial License _____
 Reinstatement _____
 *Name Change _____
 PIC # _____

INDIVIDUAL INSURANCE LICENSE APPLICATION
 State of Washington Insurance Commissioner
 4224 6th Ave SE, Bldg #5 Rowesix, Lacey, WA 98503
 POB 40257, Olympia, WA 98504-0257
 360 407-0341

RP to FBI 11/29/00 TYPE OF LICENSE 7904 11/28/00 \$75.00

<input checked="" type="checkbox"/> 1. AGENT Indicate Insurance Lines—		<input type="checkbox"/> 2. SOLICITOR Indicate Insurance Lines—		<input type="checkbox"/> 3. BROKER Indicate Insurance Lines—		<input type="checkbox"/> 4. SURPLUS LINE BROKER <input type="checkbox"/> 5. LIMITED SURPLUS LINE <input type="checkbox"/> 6. ADJUSTER <input type="checkbox"/> 7. INDEPENDENT <input type="checkbox"/> 8. PUBLIC <input type="checkbox"/> 9. GENERAL AGENT	
<input checked="" type="checkbox"/> LIFE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> PROPERTY <input type="checkbox"/> CASUALTY	<input type="checkbox"/> SURETY ONLY <input type="checkbox"/> VEHICLE ONLY <input type="checkbox"/> TRAVEL <input type="checkbox"/> CREDIT LIFE & DISABILITY <input type="checkbox"/> CREDIT CASUALTY	<input type="checkbox"/> PROPERTY-CASUALTY <input type="checkbox"/> LIFE & DISABILITY <input type="checkbox"/> LIFE-DISABILITY <input type="checkbox"/> PROPERTY-CASUALTY					

PERSONAL INFORMATION

1. Name <u>Sam Chan</u> *Previous name if name change <u>Chan Chak Yee</u>		2. Assumed Business Name Registered with Department of Licensing <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
3. Date of Birth <u>[REDACTED]</u>	4. Social Security Number <u>[REDACTED]</u>		
5. Address <u>[REDACTED]</u> State <u>[REDACTED]</u> Zip <u>[REDACTED]</u>		6. Have you been licensed within the past 2 years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Name of state <u>WA</u>	
7. Employment History (current and two years next preceding date of application) Name of Employer, address, date(s), occupation <u>Student at Central Washington University</u>			
8. Has your insurance license ever been revoked, suspended or surrendered for cause by this or any other state or province? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Have any complaints been filed against you with any Insurance Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
10. Have you been convicted of a <u>misdemeanor</u> involving embezzlement, theft, fraud, mishandling of funds or other irregularities in money transactions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
11. Have you ever been convicted of a <u>felony</u> ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If you answered yes to questions 8, 9, 10, or 11 state the facts and disposition of each conviction on reverse side.			

App American General Finance Inc

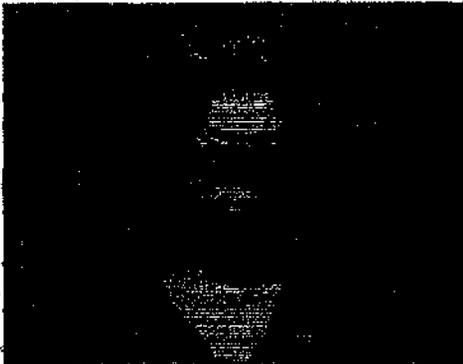
Any person misrepresenting facts on this application is subject to refusal to issue or revocation of license.
 I DO HEREBY CERTIFY THAT ALL INFORMATION GIVEN ON THIS APPLICATION IS TRUE AND COMPLETE.

SIGNATURE [Signature] DATE 11/15/00

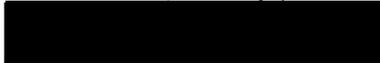
If licensed as solicitor, give name of Employing Agent or Broker: _____
 Signature of Employing Agent/Broker _____ Date _____

WASHINGTON OFFICE OF INSURANCE COMMISSIONER

4836



SAM Y. CHAN



BDATE: [REDACTED]

ASI ID: 12-WA-98016124

EXAMINATION: LIFE AGENT

EXAM DATE: 11/11/00

EXAMINATION RESULT: PASS

Congratulations! You have passed your examination.

This score report is not a permit to transact insurance business. You must first be licensed by the Office of Insurance Commissioner.

For licensing information and instructions, refer to the Washington State Candidate Guide or contact the license division of the Insurance Commissioner's Office in Olympia. (Phone (360) 407-0341)

WASHINGTON OFFICE OF INSURANCE COMMISSIONER

1874

SAM Y. CHAN



EDATE: [REDACTED]

ASI ID: 12-WA-98016124

EXAMINATION: **DISABILITY AGENT**

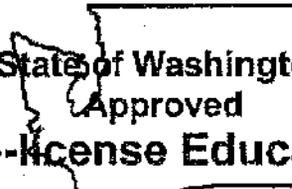
EXAM DATE: 11/06/80

EXAMINATION RESULT: **PASS**

Congratulations! You have passed your examination.

This score report is not a permit to transact insurance business. You must first be licensed by the Office of Insurance Commissioner.

For licensing information and instructions, refer to the Washington State Candidate Guide or contact the license division of the Insurance Commissioner's Office in Olympia. (Phone (360) 407-0341)



 State of Washington

 Approved

 Pre-license Education

CERTIFICATE OF COMPLETION

STUDENT NAME: Sam Chan

PRELICENSE COURSE IDENTIFICATION

Provider's Name: INSUREPASS

Provider's Location: 1925 SOUTH 341ST PLACE, FEDERAL WAY

Provider's Number: 012935

Course Subject (<i>Mark one</i>)	Credit Hours	Completion Date
<u> X </u> Life	16	<u>11/2/2000</u>
<u> </u> Disability	16	_____
<u> </u> Property	16	_____
<u> </u> Casualty	16	_____
<u> </u> Statutes & Regulations	4	_____

INSTRUCTOR CERTIFICATION

I hereby certify this course was conducted as approved by the Washington State Office of Insurance Commissioner. I further certify the person whose name appears above did personally complete this course on the date indicated.

Instructor's Name: VIRGINIA WINGER Instructor No. 0330

Signature: *Virginia Winger* Date: 11/2/2000

STUDENT CERTIFICATION

I hereby certify that I personally completed the course listed above in the manner required to satisfy the prelicense education regulation.

Signature: *S. Chan* Date: 11/02/00

This certificate valid for 12 months from completion date.

State of Washington
Approved
Pre-license Education

CERTIFICATE OF COMPLETION

STUDENT NAME: Sam Chan

PRELICENSE COURSE IDENTIFICATION

Provider's Name: INSUREPASS

Provider's Location: 1925 SOUTH 341ST PLACE, FEDERAL WAY

Provider's Number: 012935

Course Subject (<i>Mark one</i>)	Credit Hours	Completion Date
<u> </u> Life	16	<u> </u>
<u> </u> Disability	16	<u> </u>
<u> </u> Property	16	<u> </u>
<u> </u> Casualty	16	<u> </u>
<u> X </u> Statutes & Regulations	4	<u>11/2/2000</u>

INSTRUCTOR CERTIFICATION

I hereby certify this course was conducted as approved by the Washington State Office of Insurance Commissioner. I further certify the person whose name appears above did personally complete this course on the date indicated.

Instructor's Name: VIRGINIA WENGER Instructor No. 0330

Signature: *Virginia Wenger* Date: 11/2/2000

STUDENT CERTIFICATION

I hereby certify that I personally completed the course listed above in the manner required to satisfy the prelicense education regulation.

Signature: *Sam Chan* Date: 11/02/00

This certificate valid for 12 months from completion date.

CHAN #SY 24159

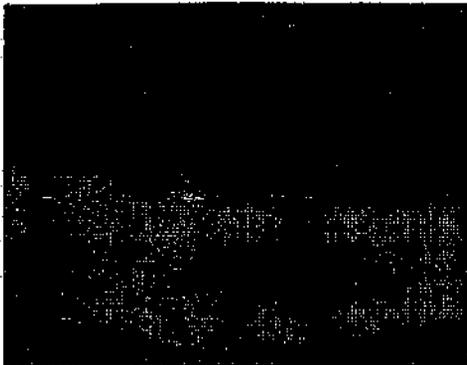
WASHINGTON OFFICE OF INSURANCE COMMISSIONER

4816

Adding lines

4/24/01 RL

SAM Y. CHAN



BDATE:



ASI ID: 12-WA-98016124

EXAMINATION: PROPERTY AGENT

EXAM DATE: 03/20/01

EXAMINATION RESULT: PASS

Congratulations! You have passed your examination.

This score report is not a permit to transact insurance business. You must first be licensed by the Office of Insurance Commissioner.

For licensing information and instructions, refer to the Washington State Candidate Guide or contact the license division of the Insurance Commissioner's Office in Olympia. (Phone (360) 407-0341)

WASHINGTON OFFICE OF INSURANCE COMMISSIONER

4816

SAM Y. CHAN

BDATE: [REDACTED]

ASI ID: 12-WA-98016124

EXAMINATION: CASUALTY AGENT

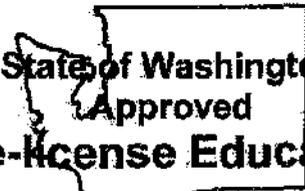
EXAM DATE: 04/02/01

EXAMINATION RESULT: PASS

Congratulations! You have passed your examination.

This score report is not a permit to transact insurance business. You must first be licensed by the Office of Insurance Commissioner.

For licensing information and instructions, refer to the Washington State Candidate Guide or contact the license division of the Insurance Commissioner's Office in Olympia. (Phone (360) 407-0341)



State of Washington
Approved
Pre-license Education

CERTIFICATE OF COMPLETION

STUDENT NAME: Sam Chan

PRELICENSE COURSE IDENTIFICATION

Provider's Name: INSUREPASS

Provider's Location: 1925 SOUTH 341ST PLACE, FEDERAL WAY

Provider's Number: 012935

Course Subject <i>(Mark one)</i>	Credit Hours	Completion Date
<u> </u> Life	16	<u> </u>
<u> </u> Disability	16	<u> </u>
<u> X </u> Property	16	<u> 3/15/01 </u>
<u> </u> Casualty	16	<u> </u>
<u> </u> Statutes & Regulations	4	<u> </u>

INSTRUCTOR CERTIFICATION

I hereby certify this course was conducted as approved by the Washington State Office of Insurance Commissioner. I further certify the person whose name appears above did personally complete this course on the date indicated.

Instructor's Name: Steve Skipper Instructor No. 0145

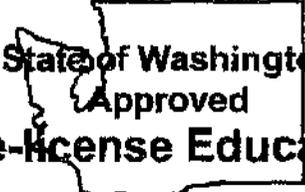
Signature: *Steve Skipper* Date: 3/15/01

STUDENT CERTIFICATION

I hereby certify that I personally completed the course listed above in the manner required to satisfy the prelicense education regulation.

Signature: *Sam Chan* Date: 3/15/01

This certificate valid for 12 months from completion date.



State of Washington
Approved
Pre-license Education

CERTIFICATE OF COMPLETION

STUDENT NAME: Sam Chan

PRELICENSE COURSE IDENTIFICATION

Provider's Name: INSUREPASS

Provider's Location: 1925 SOUTH 341ST PLACE, FEDERAL WAY

Provider's Number: 012935

Course Subject <i>(Mark one)</i>	Credit Hours	Completion Date
<u> </u> Life	16	<u> </u>
<u> </u> Disability	16	<u> </u>
<u> </u> Property	16	<u> </u>
<u> X </u> Casualty	16	<u> 3/15/01 </u>
<u> </u> Statutes & Regulations	4	<u> </u>

INSTRUCTOR CERTIFICATION

I hereby certify this course was conducted as approved by the Washington State Office of Insurance Commissioner. I further certify the person whose name appears above did personally complete this course on the date indicated.

Instructor's Name: Steve Skipper Instructor No. 0145

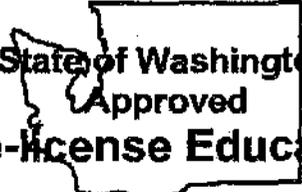
Signature: *Steve Skipper* Date: 3/15/01

STUDENT CERTIFICATION

I hereby certify that I personally completed the course listed above in the manner required to satisfy the prelicense education regulation.

Signature: *S Chan* Date: 3/15/01

This certificate valid for 12 months from completion date.


 State of Washington
 Approved
 Pre-licensure Education

CERTIFICATE OF COMPLETION

STUDENT NAME: Sam Chan

PRELICENSURE COURSE IDENTIFICATION

Provider's Name: INSUREPASS

Provider's Location: 1925 SOUTH 341ST PLACE, FEDERAL WAY

Provider's Number: 012935

Course Subject (<i>Mark one</i>)	Credit Hours	Completion Date
<u> </u> Life	16	<u> </u>
<u> </u> Disability	16	<u> </u>
<u> </u> Property	16	<u> </u>
<u> </u> Casualty	16	<u> </u>
<u> X </u> Statutes & Regulations	4	<u> 3/15/01 </u>

INSTRUCTOR CERTIFICATION

I hereby certify this course was conducted as approved by the Washington State Office of Insurance Commissioner. I further certify the person whose name appears above did personally complete this course on the date indicated.

Instructor's Name: Steve Skipper Instructor No. 0145

Signature: *Steve Skipper* Date: 3/15/01

STUDENT CERTIFICATION

I hereby certify that I personally completed the course listed above in the manner required to satisfy the prelicensure education regulation.

Signature: *Sam Chan* Date: 3/15/01

This certificate valid for 12 months from completion date.