

of the agents the reason for the termination. The name of the agent, the date MPIC notified the agent of the termination, the effective date of the termination, the number of days notice, and whether the reason for the termination was stated in the notice, in each instance is as follows:

<u>Agent</u>	<u>Date of Notice</u>	<u>Date of Termination</u>	<u>Number of Days Notice</u>	<u>Reason in Notice</u>
John M. Anderson	9/26/01	9/26/01	0	Yes
Carolyn J. England	10/31/02	10/31/02	0	No

Action

Pursuant to ORS 731.988, MPIC shall pay a civil penalty of \$1,500. The payment shall be made in the form of a check payable to the "Department of Consumer and Business Services" for the full amount due. The payment shall be delivered to the Insurance Division at 350 Winter Street NE, Room 440, Salem, OR 97301-3883, or mailed to the Insurance Division at PO Box 14480, Salem, OR 97309-0405. The payment shall be received by the Insurance Division by the date of the Final Order.

Dated June 13, 2003

/s/ Donald K. Lawler
[Signature of Representative]

Donald K. Lawler
[Printed Name of Representative]

Assistant General Counsel
[Printed Title of Representative]

Mutual Protective Insurance Company

FINAL ORDER

The director adopts, and incorporates herein by this reference, the above Stipulation as the director's final decision in this proceeding.

Dated July 16, 2003

/s/ Cory Streisinger

Cory Streisinger
Director

Department of Consumer and Business Services