

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY AND ECONOMIC DEVELOPMENT
DIVISION OF INSURANCE
550 W. 7th AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99501-3567

Order No. SR 17-02(b)) Reinstatement of Certificate
In the Matter of) of Authority No. F-10581;
FINANCIAL AMERICAN) Order under the Provisions
LIFE INSURANCE) Of AS 21.09.170(d)
COMPANY)
NAIC NO. 71455)
_____)

WHEREAS, a Certificate of Authority to transact the business of insurance
in the State of Alaska was issued to **FINANCIAL AMERICAN LIFE INSURANCE**
COMPANY domiciled in the State of Kansas.

WHEREAS, the Certificate of Authority issued to **FINANCIAL AMERICAN**
LIFE INSURANCE COMPANY to transact the business of insurance in the State of
Alaska was suspended on November 1, 2017 as the Second Quarter Statement
dated June 30, 2017 showed that the company failed to meet the basic capital
and surplus requirements of AS 21.09.070(a)

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DEVELOPMENT
DIVISION OF INSURANCE
550 W. 7th AVENUE, SUITE 1560
ANCHORAGE, ALASKA 99513-3567
PHONE: (907) 269-7900

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1 **WHEREAS, FINANCIAL AMERICAN LIFE INSURANCE COMPANY,** has now
2 returned to full compliance with Alaska statutes.
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5 **IT IS HEREBY ORDERED,** pursuant to the provisions of
6 AS 21.09.170(d) that Certificate of Authority F-10581 issued to **FINANCIAL**
7 **AMERICAN LIFE INSURANCE COMPANY,** shall be reinstated, allowing it
8 authority to continue to transact the business of insurance in the State of
9 Alaska. Pursuant to AS 21.09.170(e), this reinstatement shall automatically
10 reinstate the authority of all of its agents to act as agents of **FINANCIAL**
11 **AMERICAN LIFE INSURANCE COMPANY** in this state.
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14 **IT IS FURTHER ORDERED** that Certificate of Authority No. F-10581 will continue
15 to be held in safekeeping by **FINANCIAL AMERICAN LIFE INSURANCE COMPANY**
16 until such time as the Certificate of Authority is revoked, the Certificate of
17 Authority is surrendered or the Certificate of Authority expires.
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21 This Order is effective the 22nd day of September 2020

22 Dated this 5th day of October 2020.

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26 _____
27 LORI WING-HEIR, DIRECTOR
28 DIVISION OF INSURANCE
29

CERTIFICATE OF DISTRIBUTION

I hereby certify that copies of the documents(s) listed below were distributed to the listed parties and files by mail or by personal delivery. An original document has been forwarded to the insurer at the address listed and another original is in the Juneau office of the Division of Insurance for official filing.

Order signed by Director of Insurance on October 5, 2020, Order # SR 17-02(b), in the Matter of **FINANCIAL AMERICAN LIFE INSURANCE COMPANY**.

Vicki Schmidt, Commissioner
Kansas Insurance Department
1300 SW Arrowhead Road
Topeka, Kansas 66604

Anna DeChristofano, Corporate Secretary
Arch Life Insurance Company of America
445 South Street, Suite 220
Morristown, New Jersey 07960

Agents of record: None

Financial Examiner's file of the Division of Insurance in Anchorage.

Date: October 5, 2020

Signed: Susie M. Woods