

No. 2025-9254

**Official Order
of the
Texas Commissioner of Insurance**

Date: 04/14/2025

Subject Considered:

Adam Conley
Duncan, South Carolina 29334-8821

Default Order
TDI Enforcement File No. 34601

General Remarks and Official Action Taken:

This is a default order taken against Adam Conley (Respondent) because he submitted life insurance applications to an insurance company without the knowledge or consent of the policyholders. Respondent did not respond to a Notice of Allegations mailed by the Texas Department of Insurance (TDI). This order revokes Respondent's license and orders Respondent to pay restitution of \$5,000 to Gerber Life Insurance Company.

The following findings of fact and conclusions of law are adopted.

Findings of Fact

Failure to Respond to Notice of Allegations

1. On February 24, 2025, TDI sent a Notice of Allegations, attached as Exhibit A, to Respondent.
2. TDI sent the Notice of Allegations to Respondent's last known address provided in writing to the department, [REDACTED], Duncan, SC 29334-8821.
3. Respondent received and waived an opportunity for a hearing because Respondent failed to send TDI a written response to the Notice of Allegations within 20 days after the date the Notice of Allegations was mailed.

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Commissioner's Order

Adam Conley

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4. TDI's factual allegations set out in the attached Notice of Allegations are incorporated in this order as findings of fact.

Conclusions of Law

1. The commissioner has jurisdiction under Texas law, including TEX. INS. CODE §§ 82.051-82.055, 4001.002, 4001.102, 4001.105, 4005.101-4005.105, 4054.051 and 4101.051; TEX. OCC. CODE §§ 53.021-53.023; 28 TEX. ADMIN. CODE § 1.502; and TEX. GOV'T CODE §§ 2001.003(1) and 2001.051-2001.178.
2. The commissioner has authority to dispose of this case informally under TEX. GOV'T CODE § 2001.056; TEX. INS. CODE § 82.055; and 28 TEX. ADMIN. CODE § 1.47.
3. TDI provided proper notice to Respondent under TEX. GOV'T CODE §§ 2001.003(1), 2001.051, 2001.052, 2001.054, and 2001.056(4); and 28 TEX. ADMIN. CODE §§ 1.28, 1.47, and 19.906.
4. Based on Respondent's failure to send TDI a written response to the Notice of Allegations, the department is entitled to disposition by default under 28 TEX. ADMIN. CODE § 1.47.
5. Respondent failed to show compliance with the law.
6. TDIs factual and legal allegations set out in the attached Notice of Allegations are incorporated in this order and deemed admitted as true under 28 TEX. ADMIN. CODE § 1.47.

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Commissioner's Order

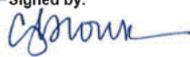
Adam Conley

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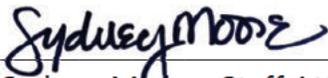
Order

It is ordered that any licenses held by Adam Conley are revoked. A copy of this order will be provided to law enforcement or other appropriate administrative agencies for further investigation as may be warranted.

It is further ordered that Adam Conley pay restitution to Gerber Life Insurance Company in the amount of \$5,000. Proof of payment of the restitution must be sent electronically to TDI within 30 days of the date of this order to EnforcementReports@tdi.texas.gov.

Signed by:

FC5D7EDDFFB4F8...
Cassie Brown
Commissioner of Insurance

Prepared and reviewed by:


Sydney Moore, Staff Attorney
Enforcement

Affidavit

STATE OF TEXAS §

§

COUNTY OF TRAVIS §

Before me, the undersigned authority, personally appeared David Moreno, who, being by me duly sworn, deposed as follows:

"My name is David Moreno and I am employed by the Texas Department of Insurance. I am of sound mind, capable of making this affidavit, and have personal knowledge of these facts which are true and correct.

I have reviewed TDI's records concerning Adam Conley. I have confirmed that:

- a. The last mailing address provided to the department in writing by Adam Conley is [REDACTED] Duncan, SC 29334-8821.
- b. The file maintained by Enforcement contains a Notice of Allegations dated February 24, 2025, which was sent to Adam Conley
- c. On February 24, 2025, the Notice of Allegations addressed to Adam Conley was mailed first-class and certified, return receipt requested, to his last known address.

Copies of the first-class mail log and certified mail log maintained by Enforcement are attached as Exhibit B and Exhibit C, respectively."

Signed by:


 638E1098D8DA4D7...
 Affidavit

SWORN TO AND SUBSCRIBED before me by means of an interactive two-way audio and video communication on 3/25/2025. This notarial act was an online notarization.

Notary Seal



Digital Certificate

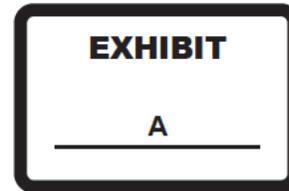
DocuSigned by:


 C3FD016A04434A6...
 Notary Public State of Texas

2025-9254

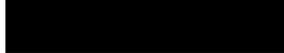


PO Box 12030 | Austin, TX 78711 | 800-578-4677 | tdi.texas.gov



February 24, 2025

Mr. Adam Conley



Duncan, SC 29334-8821

Via CM/RRR No. 9214 8901 9403 8302 0162 82

**TDI ENFORCEMENT CASE NO. 34601
NOTICE OF ALLEGATIONS AGAINST ADAM CONLEY**

The Texas Department of Insurance (TDI) seeks to take disciplinary action against you. This Notice states the allegations against you and the relief sought by TDI.

YOUR WRITTEN RESPONSE IS REQUIRED WITHIN 20 DAYS

YOU HAVE THE RIGHT TO A HEARING AND ARE INVITED TO SHOW COMPLIANCE WITH THE LAW. To request a hearing, you must send a written response to TDI within 20 days of the date this Notice was mailed.

If you fail to send a written response by the deadline, *you waive your right to a hearing*, and TDI may seek disposition by default under 28 TEX. ADMIN. CODE § 1.47, TEX. INS. CODE § 82.055, and TEX. GOV'T. CODE § 2001.056.

If you fail to send a written response by the deadline, without further notice to you, the commissioner of insurance may issue a default order that admits the factual matters asserted, deems all allegations as true, and orders the relief recommended in this Notice.

You must send your written response by mail, fax, or email to:

Sydney Moore, Staff Attorney
Texas Department of Insurance
Enforcement, MC ENF
P.O. Box 12030
Austin, Texas 78711-2030
(512) 490-1020 (Fax)
sydney.moore@tdi.texas.gov

Jurisdiction

The commissioner of insurance has jurisdiction over this matter under TEX. INS. CODE §§ 82.051–82.055, 4001.002, 4005.101, 4005.102, and 4054.051; and TEX. GOV'T CODE §§ 2001.003(1) and 2001.051–2001.178.

Factual Allegations

1. Adam Conley (Conley), individual identification number 2313408, holds a general lines agent license with life, accident, health, and HMO qualification issued by TDI on January 21, 2021.
2. Conley submitted 25 life insurance applications to Gerber Life Insurance Company (Gerber) without the knowledge or consent of the policyholders. At least two of the policyholders are Texas residents.
3. Gerber notified TDI that it had terminated Conley's appointment and filed a fraud report due to Conley's misconduct.
4. Conley received \$5,000 in unearned commissions for the fraudulently placed life insurance policies.

Legal Allegations

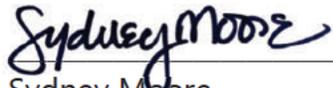
1. Conley engaged in fraudulent or dishonest acts or practices, as contemplated in TEX. INS. CODE § 4005.101(b)(5).
2. Conley misappropriated, converted to his own use, or illegally withheld money belonging to an insurer, HMO, insured, enrollee, or beneficiary as contemplated by TEX. INS. CODE § 4005.101(b)(4).

Relief Sought

TDI seeks the following relief:

1. revocation of your license;
2. restitution to Gerber Life Insurance Company under TEX. INS. CODE § 82.053; and
3. imposition of any other just and appropriate relief to which the department may be entitled to by law, including any combination of the above actions.

Respectfully,

A handwritten signature in black ink that reads "Sydney Moore". The signature is written in a cursive style with a horizontal line extending to the right from the end of the name.

Sydney Moore

State Bar No. 24056052

Texas Department of Insurance

Enforcement, MC ENF

P.O. Box 12030

Austin, Texas 78711-2030

(512) 676-6339 (Direct)

(512) 490-1020 (Fax)

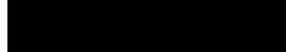
sydney.moore@tdi.texas.gov

cc: Leah Gillum, Deputy Commissioner, Fraud and Enforcement Division, MC: ENF
Whitney Fraser, Litigation Director, Enforcement, MC: ENF
Administrative Review, MC: CO-AAL

CERTIFICATE OF SERVICE

I, Sydney Moore, certify that a true and correct copy of this *Notice of Allegations Against Adam Conley* was sent by the following methods on this 24th day of February, 2025 to:

Adam Conley

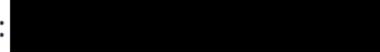


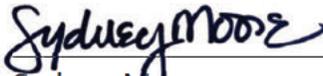
Duncan, SC 29334-8821

Via CM/RRR No.: 9214 8901 9403 8302 0162 82

Via First Class Mail

Via Email:




Sydney Moore

2025-9254

Firm Mailing Book For Accountable Mail

EXHIBIT

B

Name and Address of Sender
 Texas Dept of Insurance
 Mail Code ENF
 1601 Congress Avenue, Suite 6.900
 Austin TX 78701
 Mary Ruiz, February 24, 2025

- Check type of mail or service
- Adult Signature Required
 - Adult Signature Restricted Delivery
 - Certified Mail
 - Certified Mail Restricted Delivery
 - Collect on Delivery (COD)
 - Insured Mail
 - Priority Mail
 - First-Class Mail
 - Priority Mail Express
 - Registered Mail
 - Return Receipt for Merchandise
 - Signature Confirmation
 - Signature Confirmation Restricted Delivery

USPS Tracking/Article Number

MOORE/34601

Address (Name, Street, City, State, & Zip Code)

Adam Conley
 [Redacted]
 Duncan, SC 29334-8821

Postage

1.00

Affix Stamp Here
 (If issued as an international certificate of mailing or for additional copies of this receipt), Postmark with Date of Receipt

RR Fee

RD Fee

ASRD Fee

ASR Fee

Due Sender if COD

Insured Value

Actual Value if Registered

Handling Charge

(Extra Service) Fee

Date of Receipt

quadrant
 CORRECTION IMI
\$002.00
 02/24/2025 ZIP 78701
 043M5Z206395



Handling Charge-If Registered

Adult Signature Requ

Adult Signature Restricted D

Restricted Delivery

Return Receipt

Signature Confirmation

Signature Confirmation Restrict

Special Hand

Total Number of Pieces Received at Post Office

Postmaster, Per (Name of receiving employee)

MD

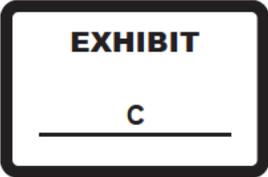
Total Number of Pieces Used by Sender

PS Form 3877, June 2015

Completed in Ink

Privacy Note: For more information on USPS privacy policies, visit usps.com/privacy policy.

2025-9254



Shipment Confirmation Acceptance Notice

A. Mailer Action

Note to Mailer: The labels and volume associated to this form online, must match the labeled packages being presented to the USPS® employee with this form.

Shipment Date: 02/24/2025
Shipped From:
Name: ENF M RUIZ
Address: 1601 CONGRESS AVENUE
City: AUSTIN
State: TX ZIP+4® 78701

Table with 2 columns: Type of Mail, Volume. Rows include Priority Mail Express®, Priority Mail®, First-Class Package Service®, Returns, International*, Other (1), and Total (1).

*Start time for products with service guarantees will begin when mail arrives at the local Post Office™ and items receive individual processing and acceptance scans.

B. USPS Action

Note to RSS Clerk:

- 1. Home screen > Mailing/Shipping > More
2. Select Shipment Confirm
3. Scan or enter the barcode/label number from PS Form 5630
4. Confirm the volume count message by selecting Yes or No
5. Select Pay and End Visit to complete transaction

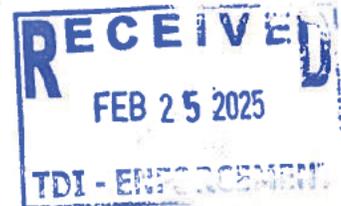
USPS EMPLOYEE: Please scan upon pickup or receipt of mail. Leave form with customer or in customer's mail receptacle.

USPS SCAN AT ACCEPTANCE



9275 0901 1935 6200 0059 2949 30

MOORE/34601



Firm Mailing Book For Accountable Mail



Name and Address of Sender:
 ENF M RUIZ
 1601 CONGRESS AVENUE
 STE 6.900
 AUSTIN TX 78701

- Check type of mail or service
- Adult Signature Required
 - Adult Signature Restricted Delivery
 - Certified Mail
 - Certified Mail Restricted Delivery
 - Collect on Delivery (COD)
 - Insured Mail
 - Priority Mail
 - Priority Mail Express
 - Registered Mail
 - Return Receipt for Merchandise
 - Signature Confirmation
 - Signature Confirmation Restricted Delivery

USPS Tracking/Article Number
 1. 9214 8901 9403 8302 0162 82
 MOORE/34601

Addressee (Name, Street, City, State, & ZIP Code™)
 MR. ADAM CONLEY
 [REDACTED]
 DUNCAN, SC 29334-8821

Affix Stamp Here
 (for additional copies of this receipt).
 Postmark with Date of Receipt.

Postage	(Extra Service) Fee	Handling Charge	Actual Value if Registered	Insured Value	Due Sender if COD	ASR Fee	ASRD Fee	RD Fee	RR Fee	SC Fee	SCRD Fee	SH Fee
0.69	4.85	Handling Charge - if Registered and over \$50,000 in value				Adult Signature Required	Adult Signature Restricted Delivery	Restricted Delivery	Return Receipt	Signature Confirmation	Signature Confirmation Restricted Delivery	Special Handling



Postmaster, Per (Name of receiving employee)

[Signature]

Complete in Ink

Total Number of Pieces Listed by Sender: 1

Total Number of Pieces Received at Post Office: 1