BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF OKLAHOMA

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|) | INSURANCE COMMISSIONER OKLAHOMA |
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|) | CASE NO. 11-0062-DIS |
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CONDITIONAL ADMINISTRATIVE ORDER AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, by and through counsel and alleges and states as follows:

JURISDICTION

- 1. John D. Doak is the Insurance Commissioner of the State of Oklahoma and as such is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code 36 O.S. §§ 101-7004 and the Oklahoma Bail Bond Act 59 O. S. §§ 1301-1340.
- 2. Respondent Chauncey Luvell Summers ("Summers") is a licensed bail bondsman in the State of Oklahoma holding license number 40041039.
- 3. Respondent Curtis Pletcher ("Pletcher"), is an admitted insurer authorized as a bail surety company in the State of Oklahoma holding certificate of authority number 199574.

FINDINGS

1. On or about June 7, 2010, an appearance bond was executed as follows:

Defendant:

Case Number(s):

City/County:

Bondsman:

TR-2000-15397

Aaron Jesse Sharp

Tulsa County

Chauncey Luvell Summers

Surety:

Curtis Pletcher 17137

Power Number(s):

Bond Amount(s):

\$137.00

On July 9, 2010, the Defendant failed to appear and the bond was declared forfeited. 2. An Order and Judgment of Forfeiture was issued by the district court on July 20, 2010, and filed in the case. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents with return receipt requested within thirty (30) days after the forfeiture.

- 3. Summers received a copy of the Order and Judgment of Forfeiture on August 12, 2010. Pletcher received a copy of the Order and Judgment of Forfeiture but failed to date the receipt.
- The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture 4. by Summers was November 11, 2010. The Defendant was not returned to custody within ninety (90) days of receipt of the Order and Judgment of Forfeiture, nor was sums due on the forfeiture deposited with the court clerk on the ninety first (91st) day.
 - 5. The forfeiture has not been paid or otherwise exonerated.

CONCLUSIONS

The allegations are found to be true and correct and Respondents have violated 59 O.S. § 1332 by failing to return the defendant within ninety (90) days or pay the bond forfeiture within ninety-one (91) days from receipt of the Order and Judgment of Forfeiture.

ORDER

IT IS THEREFORE ORDERED that Summers and Pletcher are Censured and required to pay the forfeiture amount to the Tulsa County Court in the amount of One Hundred Thirty Seven Dollars (\$137.00). The forfeiture is to be paid within 30 days of the date of this Order.

Respondents are further notified that they may request a hearing within 30 days of the receipt of this Order concerning this action and upon such request the Insurance Department shall conduct a hearing before an independent hearing examiner. A request for hearing shall be made in writing to Kim M. Rytter, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112 and state the basis for requesting the hearing.

If Respondents do not request a hearing within the 30 days allotted this Order shall be a **FINAL ORDER** on the 31st day following the receipt of the Order.

WITNESS My Hand and Official Seal this 7th day of March, 2011.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Kim M. Rytter Assistant General Counsel 3625 NW 56th Street, Suite 100 Oklahoma City, Oklahoma, 73112 (405) 521-2746

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing Order was mailed certified, return receipt requested on this 7th day of March, 2011, to:

Chauncey Luvell Summers PO Box 851 Tulsa OK 74103-1819

CERTIFIED MAIL NO: 7008 1830 0003 9410 8512

Curtis Pletcher PO Box 66 Springer OK 73458-0066

CERTIFIED MAIL NO: 7008 1830 0003 9410 8529

Kim M. Rytter

U.S. Postal Service CERTIFIED MAIL RECEIPT П (Domestic Mail Only; No Insurance Coverage Provided) 57 9 9470 ATION Postage Certified Fee 0003 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1830 Total Postage : Chauncey Luvell Summers P.O. Box 851 7008 Tulsa, OK 74103-1819 Street, Apt. No.; or PO Box No. -00002-DISKMR(AT) City, State, ZIP+4 Cond Admin Da

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 852 For delivery information visit our website at www.usps.com 9470 ATION 0003 Certified Fee R O Pestinar Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Require-1830 Total Postage & F Curtis Pletcher CONT P.O. Box 66 7008 Springer, OK 73458-0066 Street, Apt. No.; or PO Box No. 11-0062-DISKM RAN City, State, ZIP+4

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | | |
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| Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | A. Signature X | | |
| Chauncey Luvell Summers P.O. Box 851 | E DEMAYESMENTEr delivery address below: □ No 2011 | | |
| Tulsa, OK 74103-1819 legal Div | 3. Service Type Certifled Mall | | |
| and the state of | 4. Restricted Delivery? (Extra Fee) ☐ Yes | | |
| 2. Article Number (Transfer from service label) 7008 183 | 0 0003 9410 A512 | | |
| PS Form 3811, February 2004 Domestic Ret | urn Receipt 102595-02-M-1540 | | |

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| Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. RECEIVED 1. Article Addressed to: OKLAHOMA INSULATION Curtis Pletcher P.O. Box 66 Springer, OK 73458-0066 Legal Division Springer, OK 73458-0066 | | A. Signature Agent Addressee Addressee Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery Time Gelivery address different from item 1? Yes If YES, enter delivery address below: No | | |
| | | 3. Service Type Certified Mall Registered Insured Mail | | pt for Merchandise |
| | | 4. Restricted Delive | ery? (Extra Fee) | ☐ Yes |
| 2. Article Number (Transfer from service label) | 8 1830 | 0003 9410 | 8529 | |
| PS Form 3811, February 2004 | Domestic Retu | rn Receipt | | 102595-02-M-1540 |