

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN)
D. DOAK, Insurance Commissioner,)
)
Petitioner,)
v.)
)
CIMARRON MORTUARY)
Prepaid Funeral Services Permit 6399,)
)
Respondent.)

Case No. 11-0572-DIS

FILED

MAY 18 2011

INSURANCE COMMISSIONER
OKLAHOMA

**NOTICE OF RIGHT TO HEARING WITH CONDITIONAL ORDER OF
DISCIPLINARY ACTION**

The State of Oklahoma, ex rel., John D. Doak, Insurance Commissioner, alleges and states as follows:

JURSDICTION AND AUTHORITY

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 et seq., including the Prepaid Funeral Benefits Act: 36 O.S. §§ 6121-6136.18.

2. The Respondent Cimarron Mortuary ("Respondent") is a permitted provider of Prepaid Funeral Benefit Contracts in the State of Oklahoma and holds Permit Number 6399.

3. The Insurance Commissioner may censure, suspend, or revoke a prepaid funeral permit or impose a fine in the amount of \$100 to \$1,000, or impose both such punishment and fine, for violating any provision of the Prepaid Funeral Benefits Act. See 36 O.S. § 6130 (B).

FINDINGS OF FACT

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 Prepaid Funeral Benefits Act: 36 O.S. §§ 6121-6136.18.

2. Respondent is a permitted provider of Prepaid Funeral Benefits in the state of Oklahoma pursuant to 36 O.S. § 6121 and 36 O.S. § 6124, holding Permit Number 6399.

3. Respondent failed to submit its Annual Report by March 15, 2011, as required by 36 O.S. §6128.

4. The Oklahoma Insurance Department did not receive Respondent's Annual Report until March 24, 2011.

CONCLUSIONS OF LAW

1. Respondent failed to submit its Annual Report in a timely fashion and submitted its Annual Report late in violation of 36 O.S. § 6128.

2. The Insurance Commissioner may censure, suspend, or revoke a prepaid funeral permit or impose a fine in the amount of \$100 to \$1,000, or impose both such punishment and fine, for violating any provision of the Prepaid Funeral Benefits Act. *See* 36 O.S. § 6130 (B).

ORDER

IT IS THEREFORE ORDERED that the Cimarron Mortuary is assessed a civil penalty by the Oklahoma Insurance Commissioner in the amount of One Hundred Dollars (\$100.00). The Oklahoma Funeral Board may be informed of such violations if they continue to occur in the future.

IT IS FURTHER ORDERED that the above civil penalty ordered shall become immediately effective unless within thirty (30) days from receipt of this Conditional Order the Company requests in writing a hearing on the issuance of said civil penalty. If no hearing is requested, the issuance of the civil penalty shall become effective and payment shall be due by the Company at the end of said thirty (30) day period without further action by the Oklahoma Insurance Department. Any request for hearing should be directed to Kelley Callahan, Senior Attorney, Oklahoma Insurance Department, Five Corporate Plaza, 3625 N.W. 56th, Suite 100, Oklahoma City, Oklahoma, 73112.

WITNESS My Hand and Official Seal this 18th day of May, 2011.



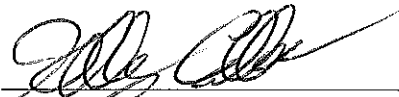


PAUL WILKENING
Deputy Insurance Commissioner of Administration
Oklahoma Insurance Department

CERTIFICATE OF MAILING

I, Kelley C. Callahan, hereby certify that a true and correct copy of the attached Notice of Right to Hearing with Conditional Order of Disciplinary Action was mailed certified mail, return receipt requested on the 18th day of May, 2011 to:

Cimarron Mortuary
ATTN: Mr. Mark Axtell, FDIC
P.O. Box 277
700 West Main Street
Boise City, OK 73933



KELLEY C. CALLAHAN
Senior Attorney

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0004 2106 2433

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post	

Sent To: Cimarron Mortuary
 ATTN: Mr. Mark Axtell, FDIC
 P.O. Box 277
 700 West Main Street
 Boise City, OK 73933
 sms/11-0572-DIS/Notice of Right

PS Form 3800, January 2001



SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

MAY 31 2011
 Cimarron Mortuary
 ATTN: Mr. Mark Axtell, FDIC
 P.O. Box 277
 700 West Main Street
 Boise City, OK 73933
 sms/11-0572-DIS/Notice of Right

2. Article Number
 (Transfer from service label)

7001 0320 0004 2106 2433

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Cynthia Axtell* Agent Addressee

B. Received by (Printed Name): *Mark Axtell* C. Date of Delivery: *5-24-11*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes