

BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA

**FILED**  
SEP 13 2011  
INSURANCE COMMISSIONER  
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, )  
Insurance Commissioner, )  
Petitioner, )  
vs. )  
JAMES MANUEL, JR., a licensed bail bondsman in )  
the State of Oklahoma, )  
Respondent. )

CASE NO. 11-0874-DIS

**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. James Manuel (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 200341.

**FINDINGS OF FACTS**

1. On or about July 15, 2011, Respondent submitted check number 2600 to the Oklahoma Insurance Department (“Department”) in the amount of \$436.33 for payment of May 2011 renewal fees. (Exhibit “A”).

2. The check was returned to the Department by the Oklahoma State Treasurer as a charge back to the Department’s account because there were insufficient funds in the account upon which the check was drawn. (Exhibit “B”).

3. On July 11, 2011, the Department mailed a letter to Respondent, via certified mail with return receipt requested, informing him of the unpaid check and the \$25.00 service fee being assessed. (Exhibit "C"). Respondent received the letter on July 13, 2011. The letter also instructed that \$436.33 for the amount of the check and \$25.00 for the service fee, for a total of \$461.33, be paid to the Department by cashier's check or money order within five (5) days of receipt of the letter.

4. Respondent submitted a money order in the amount of \$461.33 on August 18, 2011.

#### **CONCLUSION OF LAW**

Respondent acted in violation of 59 O.S. § 1310(A)(27) by uttering an insufficient check to the Insurance Commissioner.

#### **ORDER**

**IT IS THEREFORE ORDERED that Respondent is fined in the amount of Two Hundred Fifty Dollars (\$250.00).**

Respondent is further notified that he 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 Natasha M. Scott, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> Suite 100, Oklahoma City, Oklahoma 73112 and state the basis for requesting the hearing. **Such written request shall include an explanation of Respondent's actions described herein and any defenses thereof.**

**If Respondent does not request a hearing within the 30 days allotted, this Order shall be a FINAL ORDER on the 31<sup>st</sup> day following the receipt of the Order, and the fine ordered herein shall be due to the Oklahoma Insurance Department.**

WITNESS My Hand and Official Seal this 13th day of September, 2011.



JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

Natasha M. Scott  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, Oklahoma, 73112  
Tel. (405) 521-2746  
Fax (405-521-0125

### CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to be Heard* was mailed certified, return receipt requested on this 13<sup>th</sup> day of September, 2011, to:

James Manuel, Jr.  
Hot Rod Bail Bonds  
1209 S. Main  
Stillwater, OK 74076

CERTIFIED MAIL NO:  
7008 1830 0003 9411 8269

Natasha M. Scott

**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 **the** front if space permits.

1. Article Addressed to:

James Manuel, Jr  
Hot Rods Bail Bonds  
1209 S. Main St  
Shillwater, OK 74076

11-0874-DIS NMS(m) Cond. Admin Oro

RECEIVED  
OKLAHOMA INSURANCE DEPARTMENT  
SEP 20 2011

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9/15/11*  
 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

2. Article Number

(Transfer from service label)

7008 1830 0003 9411 8269

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service  
**CERTIFIED MAIL, RECEIPT**

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

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

SEP 13 2011  
OKC OK 73106

Postmark  
H

Total Postage & f

James Manuel, Jr.  
Hot Rods Bail Bonds  
1209 S. Main St.  
Stillwater, OK 74076

Sent To

Street, Apt. No.,  
or PO Box No.

City, State, ZIP+4

11-0874-DIS/NMS(mt) Cond. Admin. Ord.

7008 1830 0003 9411 8269





Ken Miller  
Oklahoma State Treasurer

AGENCY: 1385

RE: Charge Back

The following item has been charged back to your account:

Name on check : HOT ROD BAIL BONDS

Check # : 2600

Amount : \$436.33

Type : A

On : 6/30/2011

This item will appear on your monthly statement with the assigned

Charge Back # : 6586

Please sign, date and return your envelope to this office.

Banking Operations



2300 North Lincoln Blvd., Room 217, Oklahoma City, Oklahoma 73105-4895 Phone: (405)521-3191 Fax: (405)522-4508

111683349901202-5  
Dept 216

ck copy rcvd by : ad

Date : 7-6-11



# Oklahoma Insurance Department

Licensing Division  
Five Corporate Plaza  
3625 NW 56th Street, Suite 100  
Oklahoma City, OK 73112

BBD-11-0024

Phone: (405) 521-3916  
Fax (405) 522-3642  
www.oid.ok.gov

Mary Fallin  
Governor

John "Okie" Doak  
Insurance Commissioner

July 11, 2011

JAMES MANUEL  
1209 S MAIN ST  
STILLWATER OK 74074-5846


RE: License Number 0000200341, Insufficient Funds Check  
Check Number: 2600  
Check Amount: \$436.33  
Check Date: June 15, 2011  
Amount Due: \$461.33

Dear James Manuel,

The above check was returned by your bank as insufficient. Submitting an insufficient check to the Oklahoma Insurance Department is a violation of the Bail Bond Code. See 59 O.S. §1310(A)(27). The Oklahoma Insurance Department charges a twenty five dollar (\$25.00) service fee on all insufficient funds checks. You must submit a money order or cashier's check for the amount of the check and the twenty-five dollar (\$25.00) service fee within five days from receipt of this letter.

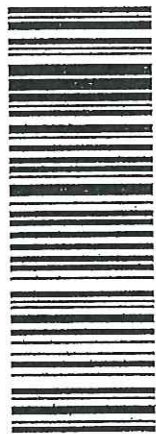
You must submit a copy of this letter with your payment. Also, because this check paid for reviewal fees, you must remit your payment to the attention of Joy Jones, Bail Bond Division.

Sincerely,

  
Anna Denman  
Sr. Licensing Administrator  
Licensing Division  
405-521-6612  
anna.denman@oid.ok.gov



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE  
**CERTIFIED MAIL™**



7010 1870 0001 8500 4699  
7010 1870 0001 8500 4699

<b>U.S. Postal Service™</b>	
<b>CERTIFIED MAIL™ RECEIPT</b>	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	-\$
Postmark Here	
Sent To	
Street, Apt. No., or PO Box No.	
City, State, ZIP+4	
<b>James Manuel</b>	
<b>CK 2600 / ad</b>	



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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

7010 1870 0001 8500 4699

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

Postmark Here: **JUL 11 2011**

Sent To

Street, Apt. No., or PO Box No. **James Manuel**

City, State, ZIP+4 **CK 2600 / ad**

PS Form 3800, August 2006 See Reverse for Instructions

**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:

**James Manuel**  
**1209 S Main St**  
**Stillwater OK 74074-5846**  
**Ck 2600 / ad**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *P. Hatcher*  Agent  Addressee

B. Received by (Printed Name) *P. Hatcher*

C. Date of Delivery *7/13/11*

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

3. Service Type

Certified Mail  Express Mail

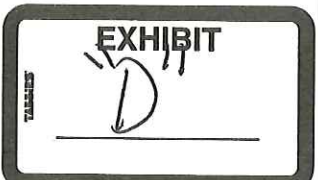
Registered  Return Receipt for Merchandise

Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service label) **7010 1870 0001 8500 4699**

Rec'd BB  
8-17-11



THIS DOCUMENT CONTAINS A TRUE WATERMARK - HOLD UP TO LIGHT TO VIEW

# WESTERN UNION MONEY ORDER

WESTERN UNION FINANCIAL SERVICES INC. - ISSUER  
Englewood, Colorado

Payable at Wells Fargo Bank Grand Junction - Downtown, N.A., Grand Junction, Colorado

14-371278426

A 606898 D 081511

143712784265 L 000000

\$ 461.33

PAY EXACTLY FOUR HUNDRED SIXTY-ONE DOLLARS AND THIRY-THREE CENTS

PAY TO THE ORDER OF

*McNamee, Dept. Supply Vendor Back*

*1209 S. Phoenix*

PURCHASER'S SIGNATURE

⑆102100400⑆ 40143712784265⑆

RECEIVED BY  
AGENT LICENSING

AUG 18 2011

OKLAHOMA  
INSURANCE DEPARTMENT