

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED
APR 20 2012
INSURANCE COMMISSIONER
OKLAHOMA

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

Case No. 12-0053-DIS

ORDER REINSTATING LICENSE

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

1. On April 17, 2012, Kozetta Woolley's bail bond license was suspended due to her failure to file a number of outstanding monthly bondsman reports due to the Commissioner, for submitting an insufficient funds check as payment of a fine in this case, and for failing to replace that check within a reasonable amount of time after being instructed to do so.


2. Woolley has filed with the Insurance Commissioner all of her outstanding monthly bondsman reports, paid the fees associated with filing the reports, and replaced the insufficient funds check she submitted to the Department.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that suspension of Woolley's bail bond license is hereby lifted.

WITNESS My Hand and Official Seal this 20th day of April, 2012.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA


Michael P. Copeland
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma 73112
Tel. (405) 521-2746

CERTIFICATE OF MAILING

I hereby certify that a true and correct copy of the above and foregoing Order Lifting Suspension was mailed by certified mail with postage prepaid and return receipt requested on this 20th day of April, 2012, to:

Kozetta Woolley
1221 N. Classen Blvd.
Oklahoma City, OK 73106

and a copy was delivered by electronic mail to:

Patricia Presley
Oklahoma County Court Clerk

Retha Chamberlain
Oklahoma County Court

Leigh Booth
Oklahoma City Municipal Court

Cathy Guyer
Oklahoma Bondsman Association


William G. "Buddy" Combs

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

7001 0320 0004 4250 3977

OFFICIAL USE	
Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To	Kozetta Woolley
Street, Apt. No. or PO Box No.	1221 N. Classen Blvd.
City, State, Zip	OKC, OK 73106
	sms/12-0053-DIS/Ord Reinst.

PS Form 3800, January 2001 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: **OKLAHOMA INSURANCE DEPARTMENT**

APR 24 2012
 Kozetta Woolley
 1221 N. Classen Blvd.
 OKC, OK 73106
sms/12-0053-DIS/Ord Reinst.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X Valerie D. Durn

B. Received by (Printed Name) *Valerie Durn*

C. Date of Delivery

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) **7001 0320 0004 4250 3977**