

BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA

**FILED**

MAR 12 2012

INSURANCE COMMISSIONER  
- OKLAHOMA -

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

Case No. 12-0207-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. Billy Wayne Dismuke (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 144708.

**FINDINGS OF FACTS**

1. On or about January 5, 2012, Respondent submitted an insufficient electronic funds transfer (“EFT”) to the Oklahoma Insurance Department (“Department”) in the amount of \$3.00 for payment of his December 2011 reviewal fees.

2. On January 27, 2015, the Department sent a letter to Respondent, via email and

certified mail, informing Respondent of the unpaid amount and the \$25.00 service fee being assessed. The letter also instructed that \$3.00 for the amount of the EFT and \$25.00 for the service fee, for a total of \$28.00, be paid to the Department by cashier's check or money order within five (5) days of receipt of the letter.

3. On February 17, 2012, Dismuke delivered money order number 7003943777 in the amount of \$28.00 replacing the insufficient funds.

### CONCLUSION OF LAW

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

### ORDER

**IT IS THEREFORE ORDERED that Billy Wayne Dismuke is hereby censured.**

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 Michael P. Copeland, 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 Billy Wayne Dismuke**

shall be censured.

WITNESS My Hand and Official Seal this 12<sup>th</sup> day of March, 2012.



JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

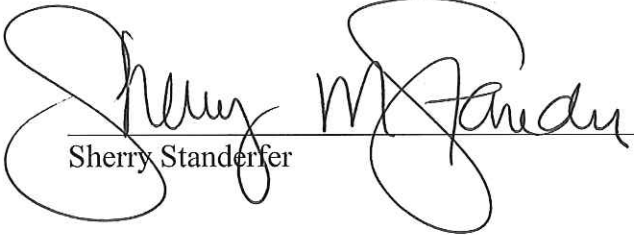
A handwritten signature in black ink, appearing to read "m copeland", is written over a horizontal line.

Michael P. Copeland  
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 12<sup>th</sup> day of March, 2012, to:

Billy Dismuke  
217 N. Harvey Ave., Suite 203  
Oklahoma City, OK 73102-3803

  
Sherry Standerfer

7006 2760 0005 6605 5935

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 City, State, ZIP

Billy Dismuke  
 217 N. Harvey, Suite 203  
 OKC, OK 73102-3803  
 sms/12-0207-DIS/Cond. Ord.

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:

Billy Dismuke  
 217 N. Harvey, Suite 203  
 OKC, OK 73102-3803  
 sms/12-0207-DIS/Cond. Ord.

2. Article Number  
(Transfer from service label)

7006 2760 0005 6605 5935

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
 B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item APR  Yes  
 IF YES, enter delivery address below: 4  No

RECEIVED OKLAHOMA INSURANCE DEPARTMENT

APR 6 2012

Legal Division Service Type

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

4. Restricted Delivery? (Extra Fee)  Yes

Domestic Return Receipt

102595-02-M-1540