

**BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA**

FILED
MAR 27 2012
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK,)
Insurance Commissioner,)

Petitioner,)

vs.)

Case No. 12-0260-DIS

JAMES R. WILLIS, a licensed bail bondsman in the)
State of Oklahoma,)

Respondent.)

**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 R. Willis (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 81966.

FINDINGS OF FACTS

1. On January 16, 2012, Respondent submitted the following insufficient electronic funds transfers (“EFT”) to the Oklahoma Insurance Department (“Department”):

October 2011 Report reviewal fee	\$3.00
November 2011 Report reviewal fee	\$3.00
December 2011 Report fee reviewal fee	\$3.00

2. On January 31, 2012, Department staff sent Respondent a letter, via certified mail, informing him of the unpaid amount and that a \$25.00 service fee was being assessed on each insufficient EFT. The letter also instructed that, regarding all three insufficient EFTs, \$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. Respondent received the letter on February 13, 2012.

4. As of the date of this Conditional Order, Respondent has not responded to the letter from the Department and has not replaced 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. Respondent acted in violation of 59 O.S. § 1310(A)(21) by failing to respond to a properly mailed notification within a reasonable amount of time.

ORDER

IT IS THEREFORE ORDERED that James R. Willis is hereby censured. Respondent is further ordered to replace all funds owed to the Department as set forth above. The total amount currently due the Department is Eighty-Four Dollars (\$84.00). Failure to replace the insufficient funds will result in further administrative action.

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 56th 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 thereto.

If Respondent does 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 and Respondent shall be censured.

WITNESS My Hand and Official Seal this 27th day of March, 2012.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

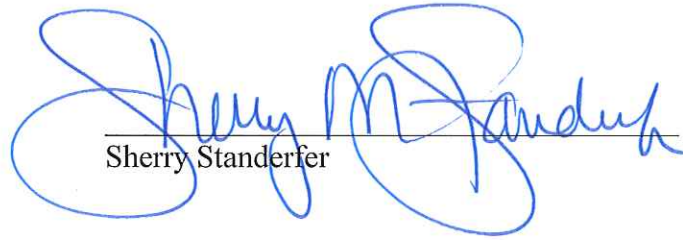
A handwritten signature in blue ink, appearing to read "M. Copeland", written over a horizontal line.

Michael P. Copeland
Assistant General Counsel
3625 NW 56th 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 27th day of March, 2012, to:

James Reginal Willis
303 K Street NW
Ardmore, OK 73401-4307


Sherry Standerfer

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

7006 2760 0005 6605 6598

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

Postmark
 here
 MAR 27 2012
 OK OK 73105

Sent To
 James Reginal Willis
 303 K. Street NW
 Ardmore, Ok 73401-4307
 sms/12-0260-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:

James Reginal Willis
 303 K. Street NW
 Ardmore, Ok 73401-4307
 sms/12-0260-DIS/Cond. Ord

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 Kessia Willis

C. Date of Delivery

Is the delivery address different from item 1? Yes
 No

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT

APR 05 2012

3
 2012
 USPS

Legal Division

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) 7006 2760 0005 6605 6598