



**FINDINGS**

1. On or about October 5, 2011, an appearance bond was executed as follows:

|                  |                   |
|------------------|-------------------|
| Defendant:       | Sierra V. Stewart |
| Case Number(s):  | 340674            |
| City/County:     | Tulsa Municipal   |
| Surety:          | Raymond Merrill   |
| Bondsman:        | Ryanne Hoffmann   |
| Power Number(s): | 5-21712           |
| Bond Amount(s):  | \$300.00          |

2. On December 7, 2011, the Defendant failed to appear, and the bond was declared forfeited. An Order and Judgment of Forfeiture was issued by the court on December 14, 2011, and filed in the case. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents with return receipt requested within thirty (30) days after the forfeiture.

3. Hoffmann received a copy of the Order and Judgment of Forfeiture on December 21, 2011.

4. Merrill received a copy of the Order and Judgment of Forfeiture on December 22, 2011.

5. The ninety-first (91<sup>st</sup>) day after receipt of the Order and Judgment of Forfeiture by Respondents was Wednesday, March 21, 2012. The Defendant was not returned to custody within ninety (90) days of receipt of the Order and Judgment of Forfeiture, nor was the face amount of the forfeited bond deposited with the Court Clerk within ninety-one (91) days of receipt of the Order and Judgment of Forfeiture.

6. As of the date of this Conditional Order, the forfeited bail bond remains unpaid.

## CONCLUSIONS OF LAW

1. The allegations are found to be true and correct, and Respondents have violated 59 O.S. § 1332 by failing to return the Defendant within ninety (90) days or remit payment in the face amount of the bond forfeiture within ninety-one (91) days from receipt of the Order and Judgment of Forfeiture.

2. Pursuant to 59 O.S. § 1310(B), any bondsman violating a provision of the Bail Bond Act, 59 O.S. §§ 1301-1340, may be subject to a civil penalty ranging from \$250 to \$2,500.

## ORDER

**IT IS THEREFORE ORDERED that Ryanne Hoffmann and Raymond Merrill are each fined Two Hundred Fifty Dollars (\$250.00).**

**IT IS FURTHER ORDERED that the face amount of the forfeited bond (\$300.00) shall be withdrawn from Raymond Merrill's professional bondsman deposit held by the Insurance Commissioner and deposited with the Tulsa Municipal Court Clerk, unless the bond forfeiture is paid before this Order becomes final.**

Respondents are further notified that they may request a hearing within 30 days of the receipt of this Order concerning this action, and upon such request, the Oklahoma 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 **give an explanation of Respondents' actions alleged herein and any defenses thereto.**

**If Respondents do not request a hearing within the 30 days allotted, this Order shall become a FINAL ORDER on the 31<sup>st</sup> day following the receipt of the Order, the face amount**

of the forfeited bail bond shall be withdrawn from the professional deposit of Raymond Merrill and deposited with the Tulsa Municipal Court Clerk, and the fines ordered herein shall be due.

WITNESS My Hand and Official Seal this 23 day of April, 2012.

JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA



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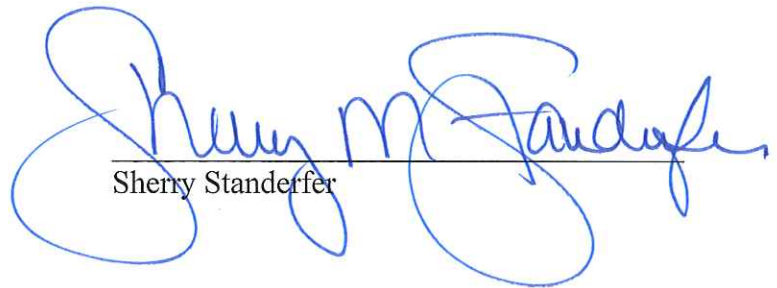
Michael P. Copeland  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, Oklahoma, 73112  
Tel. (405) 521-2746  
Fax (405) 521-0125

**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 27<sup>th</sup> day of April, 2012, to:

Raymond Merrill  
103 N. Denver Ave.  
Tulsa, OK 74103-1819

Ryanne Hoffmann  
44 E. 16<sup>th</sup> Street South  
Tulsa, OK 74119-4432



Sherry Standerfer

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

7001 0320 0004 4250 4257

OFFICIAL USE

|   |    |  |
|---|----|--|
| Postage   | \$ |  |
| Certified Fee                                     |    |  |
| Return Receipt Fee<br>(Endorsement Required)      |    |  |
| Restricted Delivery Fee<br>(Endorsement Required) |    |  |



**Total Posta**

Sent To: **Raymond Merrill**  
 103 N. Denver Ave.  
 Tulsa, Ok 74103-1819  
 sms/12-0347-DIS/Cond. Ord.

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:

Raymond Merrill  
 103 N. Denver Ave.  
 Tulsa, Ok 74103-1819  
 sms/12-0347-DIS/Cond. Ord.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: **X** *Richard*  Agent  Addressee

B. Received by (Printed Name): *Richard* C. Date of Delivery: *5-11-12*

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

If YES, enter delivery address below:

RECEIVED DEPARTMENT OF OKLAHOMA INSURANCE  
 MAY 11 2012  
 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) **7001 0320 0004 4250 4257**

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

7001 0320 0004 4250 4264

OFFICIAL USE



|   |    |
|---|----|
| Postage   | \$ |
| Certified Fee                                     |    |
| Return Receipt Fee<br>(Endorsement Required)      |    |
| Restricted Delivery Fee<br>(Endorsement Required) |    |

**Total Post:**

Sent To: **Ryanne Hoffmann**  
 44 E. 16th Street South  
 Tulsa, Ok 74119-4432  
 City, State, Z: **sms/12-0347-DIS/Cond. Ord.**

PS Form 3800, January 2001 See Reverse for Instructions

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY   |
|--|---|
| <ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | <p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input checked="" type="checkbox"/> Date of Delivery</p> <p>C. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> |
| <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Ryanne Hoffmann<br/>             44 E. 16th Street South<br/>             Tulsa, Ok 74119-4432<br/>             sms/12-0347-DIS/Cond. Ord.</p> </div>  | <p>RECEIVED<br/>             OKLAHOMA INSURANCE DEPARTMENT<br/>             MAY 04 2012<br/>             Legal Division</p>   |
|  | <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>  |
|  | <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>   |
| <p>2. Article Number<br/>             (Transfer from service label)</p>  | <p>7001 0320 0004 4250 4264</p>   |
| <p>PS Form 3811, February 2004</p>   | <p>Domestic Return Receipt 102595-02-M-1540</p>   |