

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

STATE OF OKLAHOMA, ex rel. JOHN D. )  
DOAK, Insurance Commissioner, )  
Petitioner, )  
vs. )  
AMERICAN CONTRACTORS INDEMNITY )  
COMPANY, an insurance company licensed to )  
act as bail surety in the State of Oklahoma, )  
AND )  
FRED AL GREEN, a licensed bail bondsman in )  
the State of Oklahoma, )  
Respondents. )

CASE NO. 12-0379-DIS

**FILED**  
APR 27 2012  
INSURANCE COMMISSIONER  
OKLAHOMA

**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. §§ 101-7301, and the Oklahoma Bail Bond Act, 59 O. S. §§ 1301-1340.
2. Respondent American Contractors Indemnity Company (“American Contractors”) is an insurance company licensed to act as bail surety in the State of Oklahoma holding NAIC number 10216.
3. Respondent Fred Al Green (“Green”) is a licensed bail bondsman in the State of Oklahoma holding license number 199096.

**FINDINGS OF FACT**

1. On or about September 28, 2011, an appearance bond was executed as follows:

Defendant:	Zachary A. Ricker
Case Number(s):	CF-2010-284
City/County:	Osage County
Surety:	American Contractors Indemnity Company
Bondsman:	Fred Al Green
Power Number(s):	A7-2247025
Bond Amount(s):	\$7,500

2. On December 16, 2011, the Defendant failed to appear and the bond was declared forfeited. An Order and Judgment of Forfeiture was issued by the court on January 3, 2012, 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. American Contractors received a copy of the Order and Judgment of Forfeiture on January 5, 2012.

4. Green received a copy of the Order and Judgment of Forfeiture on January 11, 2012.

5. The ninety-first (91<sup>st</sup>) day after receipt of the Order and Judgment of Forfeiture by Respondents was Wednesday, April 11, 2012. The Defendant was not returned to custody within ninety (90) days, 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. The face amount of the bond forfeiture was paid to the Osage County Court Clerk on April 12, 2012, the ninety-second (92<sup>nd</sup>) day after receipt of the Order and Judgment of Forfeiture.

### **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 of receipt of the Order and Judgment of Forfeiture.

2. Pursuant to 59 O.S. § 1310(B), any bondsman or company 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 American Contractors Indemnity Company and Fred Al Green are each fined Three Hundred Seventy-Five Dollars (\$375.00).**


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 Buddy Combs, 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 either Respondent fails to either pay the fine ordered or request a hearing within 30 days of receipt of this Order, this Order shall become a **FINAL ORDER** on the 31<sup>st</sup> day after receipt, the Respondent's license shall be **SUSPENDED**, and the fine ordered herein shall be due.

WITNESS My Hand and Official Seal this 26 day of April, 2012.

JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA



  
William G. "Buddy" Combs  
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:

American Contractors Indemnity Company  
Bail Bond Division  
601 S. Figueroa St., Suite 1600  
Los Angeles, CA 90017-5721

Fred Al Green  
230 E. Fifth  
Pawhuska, OK 74056

  
\_\_\_\_\_  
William G. "Buddy" Combs



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

7001 0320 0004 4250 4141

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage</b>	

**Sent To** American Contractors Indemnity Company  
 Bail Bond Division  
 601 S. Figueroa St., Suite 1600  
 Los Angeles, CA 90017-5721  
 sms/12-0379-DIS/Cond. Ord.

Postmark Here: OKLAHOMA CITY, OK APR 27 2012

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:

American Contractors Indemnity Company  
 Bail Bond Division  
 601 S. Figueroa St., Suite 1600  
 Los Angeles, CA 90017-5721  
 sms/12-0379-DIS/Cond. Ord.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): *[Name]*

C. Date of Delivery: *05/04/12*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

RECEIVED  
 OKLAHOMA INSURANCE DEPARTMENT  
 MAY 04 2012

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 4141

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1500

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

7001 0320 0004 4250 4158

OFFICIAL RECEIPT



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

**Total Postage**

Sent To: Fred Al Green  
 230 E. Fifth  
 Pawhuska, OK 74056  
 sms/12-0379-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 checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p>Fred Al Green                  230 E. Fifth                  Pawhuska, OK 74056                  sms/12-0379-DIS/Cond. Ord.</p> </div>	<p>Is delivery address different from item 1? <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p> <p>Is delivery address below: <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No</p>
	<p>RECEIVED                  OKLAHOMA INSURANCE DEPARTMENT                  MAY 9 2012                  Legal Division</p>
	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <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                  (Transfer from service label)</p>	<p>7001 0320 0004 4250 4158</p>
PS Form 3811, February 2004	Domestic Return Receipt
	102595-02-M-1540