

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

**FILED**

OCT 04 2012

INSURANCE COMMISSIONER  
OKLAHOMA

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

Case No. 12-0879-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. §§ 101-7301, and the Oklahoma Bail Bond Act, 59 O. S. §§ 1301-1340.

2. Michele England (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 199070.

**FINDINGS OF FACT**

1. On July 16, 2012, Respondent submitted to the Oklahoma Insurance Department (“Department”) her June 2012 Cash report.

2. With this report, Respondent submitted an Electronic Funds Transfer (“EFT”) of \$3.00. The Oklahoma State Treasurer charged the EFT back to the Department as “Insufficient Funds.”

3. On September 13, 2012, Department staff sent Respondent a letter, via certified mail, requesting that the funds be replaced and a service fee of \$25.00 be paid within five days of receipt of

the letter. Respondent signed for the letter on September 17, 2012.

4. On September 20, 2012, Respondent replaced the insufficient EFT and paid the \$25 service fee with a money order.

**CONCLUSIONS OF LAW**

1. Respondent has violated 59 O.S. § 1310(A)(27) by uttering insufficient funds to the Commissioner.

**ORDER**

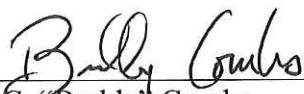
**IT IS THEREFORE ORDERED that Michele England is CENSURED.**

Respondent is further notified that she 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 Respondent's actions described herein and any defenses thereto.** If Respondent does 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.

WITNESS My Hand and Official Seal this 4<sup>th</sup> day of October, 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 MAILING**

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 4<sup>th</sup> day of October, 2012, to:

Michele England  
1511 W. Gore Blvd., Suite 2  
Lawton, OK 73501-3662

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

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

OFFICIAL



7001 0320 0003 9967 8797

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

**Total Postage**

Sent To: Michele England  
 1511 W. Gore Blvd., Suite 2  
 Lawton, Ok 73501-3662  
 sms/12-0879-DIS/Cond. Ord.

Street, Apt. No. or PO Box No.  
 City, State, ZIP

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:

Michele England  
 1511 W. Gore Blvd., Suite 2  
 Lawton, Ok 73501-3662  
 sms/12-0879-DIS/Cond. Ord.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Cristina Aitaro*

B. Received by (Printed Name) *Cristina Aitaro* C. Date of Delivery *10/5/12*

D. Is 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

RECEIVED  
 OKLAHOMA INSURANCE DEPARTMENT  
 OCT 10 2012  
 Legal Division

2. Article Number (Transfer from service label) 7001 0320 0003 9967 8797