



Case Number(s):	5906961; 5906962
City/County:	Tulsa Municipal
Surety:	Roxana Sellars
Bondsman:	Diana Baldwin
Power Number(s):	09711; 09712
Bond Amount(s):	\$750; \$150

2. On July 9, 2012, the Defendant failed to appear, and the bonds were orally declared forfeited. An Order and Judgment of Forfeiture was issued by the court for each case on July 27, 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's filing.

3. Baldwin received a copy of each Order and Judgment of Forfeiture on August 6, 2012.

4. Sellars received a copy of each Order and Judgment of Forfeiture on August 6, 2012.

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

6. As of the date of this Order, the bond forfeitures have not been paid or otherwise set aside or the bonds exonerated.

### **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 may be subject to a civil penalty ranging from \$250 to \$2,500.

**ORDER**

**IT IS THEREFORE ORDERED that Diana Baldwin and Roxana Sellars are each CENSURED and FINED Two Hundred Fifty Dollars (\$250.00).**

**IT IS FURTHER ORDERED that pursuant 59 O.S. § 1332 the face amount of the bonds, Nine Hundred Dollars (\$900.00), shall be withdrawn from the deposit placed with the State of Oklahoma by Roxana Sellars as reserve to meet sums due on forfeiture. The sums withdrawn are to be forwarded to the Tulsa Municipal Court Clerk for payment of the bonds in case numbers 5906961 and 5906962, Defendant Elizabeth Jolene Mooney. Such sums shall not be withdrawn from the deposit of Roxana Sellars if the bond forfeitures are paid or set aside or vacated within 30 days of receipt of this Order.**

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 William G. "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.

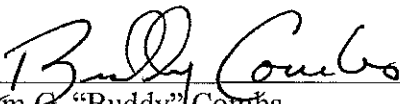
**If Respondents do not request a hearing within the 30 days allotted, this Order shall become a FINAL ORDER on the 31<sup>st</sup> day following the receipt of the Order and the face**

**amount of the bond forfeitures shall be withdrawn from Roxana Sellars' professional deposit and forwarded to the Tulsa Municipal Court Clerk.**

WITNESS My Hand and Official Seal this 2<sup>nd</sup> day of January, 2013.



JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

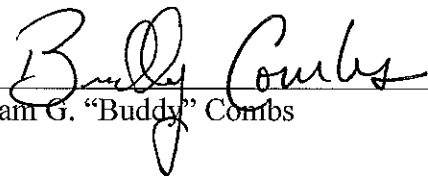
  
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William G. "Buddy" Combs  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, Oklahoma, 73112  
Tel. (405) 521-2746  
Fax (405) 522-0125

**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 2<sup>nd</sup> day of January 2013, to:

Diana Baldwin  
P.O. Box 9803  
Tulsa, OK 74157


Roxana Sellars  
P.O. Box 9803  
Tulsa, OK 74157

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

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>	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to:	B. Received by (Printed Name) <u>J. Bear</u> C. Date of Delivery <u>1/14/13</u>
<div style="border: 1px solid black; padding: 5px; width: fit-content;">             Diana Baldwin              P.O. Box 9803              Tulsa, Ok 74157              sms/12-1102-DIS/Cond. Ord.           </div>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811, February 2004	Domestic Return Receipt <span style="float: right;">102595-02-M-1540</span>

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

7001 0320 0003 9967 3068



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

Sent To

Street, Apt. No., or PO Box No.

City, State, ZIP+

Diana Baldwin  
 P.O. Box 9803  
 Tulsa, Ok 74157  
 sms/12-1102-DIS/Cond. Ord.

PS Form 3800, January 2007 See back 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>		A. Signature <input checked="" type="checkbox"/> <i>J. Sellars</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) <i>J. Sellars</i>	C. Date of Delivery <i>1/9/13</i>
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Roxana Sellars  P.O. Box 9803  Tulsa, Ok 74157  sms/12-1102-DIS/Cond. Ord. </div>		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)		3. Service Type <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.	
PS Form 3811, February 2004		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		RECEIVED OKLAHOMA INSURANCE DEPARTMENT JAN 14 2013 Legal Division	
		7001 0320 0003 9967 3051	
Domestic Return Receipt		102595-02-M-1540	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
OFFICIAL USE	
Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage 8</b>	
Sent To	
Street, Apt. No., or PO Box No.	
City, State, ZIP+4	
Roxana Sellars P.O. Box 9803 Tulsa, Ok 74157 sms/12-1102-DIS/Cond. Ord.	
Postmark Here 	
PS Form 3800, January 2001	