

BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF OKLAHOMA

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

FILED
 APR 04 2013
 INSURANCE COMMISSIONER
 OKLAHOMA

Case No. 13-0033-DIS

CONSENT ORDER

COMES NOW the State of Oklahoma, ex rel. John D. Doak, Insurance Commissioner, and the Respondent, Katie Hazelwood, and enter into this Consent Order.

JURISDICTION

1. That the Insurance Commissioner has jurisdiction over this cause, pursuant to the provisions of the Oklahoma Bail Bond Code, OKLA. STAT. tit. 59, §§ 1301-1340.
2. That Respondent is a licensed bail bondsman in the State of Oklahoma holding license number 199979.
3. That Respondent has been apprised of her rights including the right to a public hearing and has knowingly and freely waived said rights and enters into this Consent Order as a voluntary settlement to the issues and questions raised in the above captioned case.

STIPULATIONS OF FACT

1. On September 17, 2012, Respondent submitted to the Oklahoma Insurance Department ("Department") her August 2012 Indiana Lumbermens Mutual Insurance Company report.
2. Respondent submitted with the report an Electronic Funds Transfer ("EFT") of Three Hundred Seven Dollars and Sixty-Five Cents (\$307.65).

3. On September 27, 2012, the Oklahoma State Treasurer charged the EFT back to the Department as "Not Sufficient Funds."

4. On November 26, 2012, Department staff sent Respondent a letter by email and certified mail, with return receipt requested, informing Respondent of the charge back and requesting that the funds be replaced and a service fee of \$25.00 be paid, for a total of Three Hundred Thirty-Two Dollars and Sixty-Five Cents (\$332.65), within five days of receipt of the letter. The certified letter was returned to the Department marked "Return to Sender, Unclaimed, Unable to Forward."

5. On November 26, 2012, Respondent responded to the Department's E-Mail and stated that she would resolve the matter the following day.

6. As of the date of this Order, Respondent has not replaced the insufficient EFT.

CONCLUSIONS OF LAW

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

ORDER AND CONSENT

1. IT IS THEREFORE ORDERED by the Insurance Commissioner and CONSENTED to by the Respondent that she shall remit payment in the amount of Three Hundred Thirty-Two Dollars and Sixty-Five Cents (\$332.65) to the Bail Bond Division of Oklahoma Insurance Department within thirty (30) days of the date this Order is filed.

2. IT IS FURTHER ORDERED by the Insurance Commissioner and CONSENTED to by the Respondent that she shall be and hereby is fined in the amount of Two Hundred Fifty Dollars (\$250.00), due and payable to the Oklahoma Insurance Department within sixty (60) days of the date this Order is filed.

3. IT IS FURTHER ORDERED by the Insurance Commissioner and CONSENTED to by the Respondent that immediately upon nonpayment of the fine and payment ordered herein, Respondent's bail bond license shall be suspended instanter, and the suspension shall remain in effect until the proper payments are made and the suspension is lifted by an Order of the Commissioner.

WITNESS My Hand and Official Seal this 3rd day of April, 2013.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

John D. Miller

JOHN D. MILLER
Hearing Examiner

APPROVED:

Buddy Combs

BUDDY COMBS
Assistant General Counsel


Katie Hazelwood

KATIE HAZELWOOD
Respondent

CERTIFICATE OF MAILING

I, Buddy Combs, hereby certify that a true and correct copy of the above and foregoing Consent Order was mailed via certified mail, with return receipt requested, on this 4th day of April, 2013, to:

Katie Hazelwood
1000 SW 100th Cir.
Oklahoma City, OK 73139-2923



BUDDY COMBS
Assistant General Counsel

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

7001 0320 0003 9967 4706

OFFICIAL USE

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

Postmark Here
 APR 04 2013
 OKLAHOMA CITY OK 73112

Sent To
 Street, Apt. No.; or PO Box No.
 City, State, ZIP+4

Katie Hazelwood
 1000 SW 100th Cir.
 Oklahoma City, OK 73139-2923
 rlg/13-0033-DIS/Consent Ord.

PS Form 3800, January 2012

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>X</i> <i>[Signature]</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Katie Hazelwood</i></p> <p>C. Date of Delivery</p> <p><i>4-12-13</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p><i>OKLAHOMA INSURANCE DEPARTMENT</i></p> <p><i>APR 16 2013</i></p> <p><i>Legal Division</i></p> <div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>Katie Hazelwood 1000 SW 100th Cir. Oklahoma City, OK 73139-2923 rlg/13-0033-DIS/Consent Ord.</p> </div>	<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 (Transfer from service label)</p> <p>7001 0320 0003 9967 4706</p>	<p><i>OKLAHOMA CITY OK 73112</i></p> <p><i>APR 11 2013</i></p> <p><i>USPS PENNSYLVANIA</i></p>
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540