

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED

OCT 04 2013

**INSURANCE COMMISSIONER
OKLAHOMA**

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

Case No. 13-0984-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. Respondent Billy Don Matney (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 100124508.

FINDINGS OF FACT

1. Respondent submitted his August 2013 United States Fire Insurance Company (“USFIC”) report to the Oklahoma Insurance Department on September 19, 2013. The report was due September 16, 2013.

2. Respondent has been previously cited in 2013 for filing late monthly reports in

case 13-0735-DIS.

CONCLUSIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A)(22) for failing to file a report as required by 59 O.S. § 1314.

2. Respondent has violated 59 O.S. § 1314(B), which states that “monthly reports shall be submitted electronically to the Insurance Commissioner by the fifteenth day of each month.”

3. Pursuant to 59 O.S. § 1310(B), “any person violating any provision of Sections 1301 through 1340 of this title may be subject to a civil penalty of not less than Two Hundred Fifty Dollars (\$250.00) nor more than Two Thousand Five Hundred Dollars (\$2,500.00) for each occurrence.”

ORDER

IT IS THEREFORE ORDERED that Billy Don Matney is CENSURED and FINED Two Hundred Fifty Dollars (\$250.00).

Respondent is further notified that he 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 56th St., Suite 100, Oklahoma City, Oklahoma 73112, and **state the basis for requesting the hearing.**

If Respondent does not request a hearing within the 30 days allotted, this Order shall

become a FINAL ORDER on the 31st day following the receipt of the Order. The fine ordered herein shall be due within 30 days after the date this Order becomes a FINAL ORDER.

WITNESS My Hand and Official Seal this 4th day of October, 2013.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Buddy Combs
Buddy Combs

Assistant General Counsel
3625 NW 56th 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 4th day of October, 2013, to:

Billy Don Matney
PO BOX 382
TECUMSEH, OK 74873-0382

And

Billy Don Matney
47581 HIGHWAY 39
KONAWA, OK 74849-8824

Buddy Combs
Buddy Combs

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

OFFICIAL USE

7001 0320 0004 4249 3735

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



Total Postage

Sent To: **Billy Don Matney**
 47581 Highway 39
 Konawa, OK 74849-8824
 sms/13-0984-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:

Billy Don Matney
 47581 Highway 39
 Konawa, OK 74849-8824
 sms/13-0984-DIS/Cond. Ord.

OCT 11 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature: Agent Addressee
Brandi Schur

B. Received by (Printed Name): *Brandi Schur*

C. Date of Delivery: *10/9/13*

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

2. Article Number (Transfer from service label) **7001 0320 0004 4249 3735**

CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0004 4249 3728

OFFICIAL USE



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

Total Postage /

Sent To
Billy Don Matney
 P.O. Box 382
 Tecumseh, OK 74873-0382
 sms/13-0984-DIS/Cond Ord.

PS Form 3800, January 2007 See Reverse for Instructions

Oklahoma City, OK 73112-4511

CERTIFIED MAIL



7001 0320 0004 4249 3728



U.S. POSTAGE PITNEY BOWES

 ZIP 73112 \$ 006.57⁰
 02 1W
 0001363374 OCT 04 2013



Billy Don Matney
 P.O. Box 382
 Tecumseh, OK 74873-0382

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT
 OCT 24 2013
 Legal Division

10-5
 10-10
 10-20

NIXIE 731 DE 1700 0110/22/13
 RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD
 BC: 73112451125 *2557-00027-22-02

73112 04511

CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

7001 0320 0004 4249 3728

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



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

Sent To

Billy Don Matney
P.O. Box 382
Tecumseh, OK 74873-0382
sms/13-0984-DIS/Cond Ord.

PS Form 3800, January 2004 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:

Billy Don Matney
P.O. Box 382
Tecumseh, OK 74873-0382
sms/13-0984-DIS/Cond Ord.

2. Article Number

(Transfer from service label)

7001 0320 0004 4249 3728

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

B. Received by (Printed Name) C. Date of Delivery

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

OCT 24 2013

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

