

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

STATE OF OKLAHOMA, ex rel. JOHN D.)
DOAK, Insurance Commissioner,)
)
Petitioner,)
vs.) CASE NO. 13-1251-DIS
)
BILLY DISMUKE, a licensed bail bondsman in)
the State of Oklahoma,)
)
Respondent.)

FILED

DEC 11 2013

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 Billy Dismuke ("Respondent") is a licensed bail bondsman in the State of Oklahoma holding license number 144708. His mailing address of record with the Oklahoma Insurance Department ("the Department") is 2828 NW 57th Street, OKC, OK 73112-6814.

FINDINGS OF FACT

1. On November 5, 2013, the Department issued a Conditional Administrative Order and Notice of Right to be Heard against Respondent in case number 13-1112-DIS. A copy of the Order is attached as Exhibit "A."

2. The Order was mailed via certified mail, with return receipt requested, to Respondent's proper mailing address of record with the Department.

3. On December 3, 2013, the certified mailing was returned to the Department marked by the United States Postal Service ("USPS") as "Unclaimed." A copy of the USPS green card is attached as Exhibit "B."

4. The USPS website shows that notice of the certified mailing was left for Respondent on November 6. A copy of the USPS tracking web page is attached as Exhibit "C."

CONCLUSIONS OF LAW

1. The allegations are found to be true and correct, and Respondent has violated 59 O.S. § 1310(A)(32) by failing to claim a certified mailing from the Insurance Department.

ORDER

IT IS THEREFORE ORDERED that Billy Dismuke 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 Suite 100, Oklahoma City, Oklahoma 73112 and **give an explanation of Respondents' actions alleged 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 31st day following the receipt of the Order. Any fine ordered herein shall be due and payable to the Oklahoma Insurance Department within 30

days after the date this Order becomes a Final Order.

WITNESS My Hand and Official Seal this 12th day of December, 2013.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

William G. "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 12th day of December, 2013, to:

Billy Dismuke
2828 NW 57th Street
Oklahoma City, OK 73112-6814

William G. "Buddy" Combs

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

FILED

NOV 05 2013

INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK,)
Insurance Commissioner,)

Petitioner,)

vs.)

Case No. 13-1112-DIS

BILLY DISMUKE, a licensed bail bondsman in the)
State of Oklahoma,)

Respondent.)

**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. Billy Dismuke ("Respondent") is a licensed bail bondsman in the State of
Oklahoma holding license number 144708.

FINDINGS OF FACT

1. On October 28, 2013, professional bail bondsman Curt Pletcher submitted to the
Oklahoma Insurance Department ("the Department") a notice of appointment for Respondent.

2. Accompanying the notice of appointment was an affidavit prepared pursuant to 59
O.S. § 1317(C), stating, among other things, that Respondent did not owe any fines to the
Department. Respondent signed the notarized affidavit on October 25, 2013.



3. As of October 25, 2013, Respondent owed fines to the Department in cases 12-0921-DIS, 13-0194-DIS, 13-0377-DIS, and 13-0380-DIS.

CONCLUSIONS OF LAW

1. Respondent filed a false affidavit in violation of 59 O.S. § 1317(C), which mandates that “[p]rior to the issuance of a new surety appointment for a surety bondsman or managing general agent, the bondsman or agent shall file an affidavit with the Commissioner stating that no forfeitures are owed to any court, no fines are owed to the insurance department, and no premiums or indemnification for forfeitures or fines are owed to an insurer, insureds, or others received in the conduct of business under the license.”

2. Pursuant to 59 O.S. § 1317(C), if any statement made on the affidavit is found to be false, the Commissioner may apply the sanctions set forth in 59 O.S. § 1310, which include a fine, censure, suspension, or revocation.

ORDER

IT IS THEREFORE ORDERED that Billy Dismuke 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 Suite 100, Oklahoma City, Oklahoma 73112 and **give an explanation of Respondent’s actions described herein and any defenses thereto.**

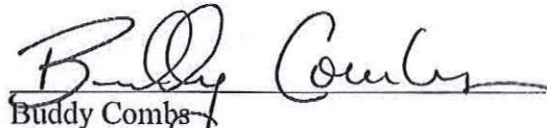
If Respondent fails to request a hearing on this matter within 30 days of receipt of this

Order, this Order shall become a **FINAL ORDER** on the 31st day. Any 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 5th day of November, 2013.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

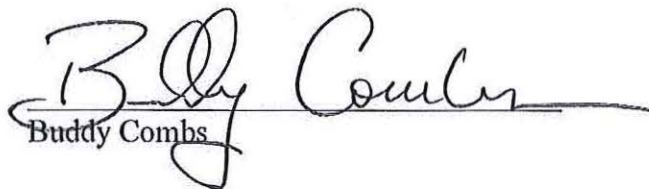


Buddy Combs
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 521-2746
Fax (405) 522-0125

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 5th day of November, 2013, to:

Billy Dismuke
2828 NW 57TH ST
OKLAHOMA CITY, OK 73112-6814


Buddy Combs

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

7001 0320 0004 4249 2325

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

OFFICIAL SEAL
 OKLAHOMA CITY OK
 DEC 13 2013
 73117-9998

Sent To
 Billy Dismuke
 2828 NW 57th Street
 OKC, OK 73112-6814
 sms/13-1251-DIS/Cond. Ord.

PS Form 3800, Jan 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 mail piece or on the front if space permits.

1. Article Addressed to:

Billy Dismuke
 2828 NW 57th Street
 OKC, OK 73112-6814
 sms/13-1251-DIS/Cond. Ord.

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ 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

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 2325

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Have questions? We're here to help.

Tracking Number: 70010320000442493315**Product & Tracking Information****Postal Product:****Features:**
Certified Mail™**Available Options**

DATE & TIME	STATUS OF ITEM	LOCATION
November 30, 2013 , 12:56 am	Processed through USPS Sort Facility	OKLAHOMA CITY, OK 73107
November 29, 2013 , 3:39 pm	Processed through USPS Sort Facility	OKLAHOMA CITY, OK 73107
November 28, 2013 , 4:58 pm	Processed through USPS Sort Facility	OKLAHOMA CITY, OK 73107
November 25, 2013 , 9:06 am	Unclaimed	OKLAHOMA CITY, OK 73112
November 6, 2013 , 9:12 am	Notice Left	OKLAHOMA CITY, OK 73112
November 6, 2013 , 3:23 am	Processed through USPS Sort Facility	OKLAHOMA CITY, OK 73107
November 5, 2013	Depart USPS Sort Facility	OKLAHOMA CITY, OK 73107
November 5, 2013 , 9:46 pm	Processed through USPS Sort Facility	OKLAHOMA CITY, OK 73107

Track Another Package

What's your tracking (or receipt) number?

[Track It](#)**LEGAL**[Privacy Policy ›](#)[Terms of Use ›](#)[FOIA ›](#)[No FEAR Act EEO Data ›](#)**ON USPS.COM**[Government Services ›](#)[Buy Stamps & Shop ›](#)[Print a Label with Postage ›](#)[Customer Service ›](#)[Delivering Solutions to the Last Mile ›](#)[Site Index ›](#)**ON ABOUT.USPS.COM**[About USPS Home ›](#)[Newsroom ›](#)[USPS Service Alerts ›](#)[Forms & Publications ›](#)[Careers ›](#)**OTHER USPS SITES**[Business Customer Gateway ›](#)[Postal Inspectors ›](#)[Inspector General ›](#)[Postal Explorer ›](#)

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(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

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



Total Postage /

Billy Dismuke
2828 NW 57th Street
OKC, OK 73112-6814

sms/13-1112-DIS/Cond Ord

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

PS Form 3800, January 2001

See Reverse for Instructions

Oklahoma City, OK 73112-4511

CERTIFIED MAIL



7001 0320 0004 4249 3315

neopost

11/05/2013

US POSTAGE

FIRST CLASS MAIL

\$006.57



ZIP 112
041L12203/32

RECEIVED
OKLAHOMA INS DEPARTMENT

DEC 03 2013

Legal Division



Billy Dismuke
2828 NW 57th Street
OKC, OK 73112-6814

tabbies

B

EXHIBIT

11-9
19

NIXIE 731 5E 1700 0111/29/13 UNC

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

BC: 73112451999 *2457-01843-28-05

73112 4519

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)	



Total Postage: _____
Sent To: _____
Street, Apt. No., or PO Box No.: _____
City, State, ZIP+4: _____

Billy Dismuke
2828 NW 57th Street
OKC, OK 73112-6814
sms/13-1112-DIS/Cond Ord

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

PS Form 3800, January 2001 See Reverse for Instructions

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.		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <div>Billy Dismuke 2828 NW 57th Street OKC, OK 73112-6814 sms/13-1112-DIS/Cond Ord</div>		B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label) 7001 0320 0004 4249 3315		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
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.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

DEC 03 2013
Legal Division