

Defendant: Adrian Lamar Williams
Case Number(s): CF-2011-572
City/County: Payne County
Surety: International Fidelity Insurance Company
Bondsman: Jill Lynn Dillard
Power Number(s): IS15K-203802
Bond Amount(s): \$7500

2. On August 2, 2013, the Defendant failed to appear, and the bond was orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on August 23, 2013. 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 Order's filing.

3. Dillard did not receive a copy of the Order and Judgment of Forfeiture.

4. IFIC received a copy of the Order and Judgment of Forfeiture on August 26, 2013.

5. The ninetieth (90th) day after receipt of the Order and Judgment of Forfeiture by Respondents was Sunday, November 24, 2013.

6. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Monday, November 25, 2013.

7. As of the date of this Order, the bond forfeiture has not been paid or otherwise set aside or the bond exonerated.

8. 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, after receipt of the Order and Judgment of Forfeiture by Respondents.

CONCLUSIONS OF LAW

1. The allegations are found to be true and correct, and Respondents have violated 59 O.S. § 1332(D) 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 or company violating a provision of the Bail Bond Act, 59 O.S. §§ 1301-1340, may be subject to a fine of not less than \$250 but not more than \$2,500.

3. Pursuant to 59 O.S. § 1332(D)(4)(a), when a surety company does not properly deposit with the court clerk the face amount of the forfeited bond, the Commissioner shall “cancel the license privilege and authorization of the insurer to do business within the State of Oklahoma and cancel the surety appointment of all surety bondsman agents of the insurer.

ORDER

IT IS THEREFORE ORDERED that Jill Lynn Dillard and International Fidelity Insurance Company are each **CENSURED** and **FINED** Two Hundred Fifty Dollars (\$250.00).

IT IS FURTHER ORDERED that the face amount of the bond forfeiture shall be deposited with the Payne County Court Clerk (or the bond forfeiture otherwise set aside or the bond exonerated) within thirty (30) days of receipt of this Order. Failure to do so shall result in the **CANCELLATION** of International Fidelity Insurance Company’s license privilege and authorization to do business within the State of Oklahoma and **CANCELLATION** of the surety appointment of all surety bondsman agents of International Fidelity Insurance Company.

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 Dan R. Byrd, Assistant General Counsel, Oklahoma Insurance Department, Legal Division,

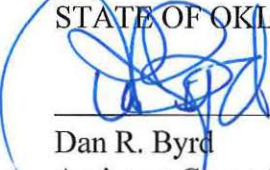
3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112 and **give an explanation of Respondents' actions alleged herein and any defenses thereto.**

If Respondents do 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, and the fines ordered herein shall be due.

WITNESS My Hand and Official Seal this 7th day of February, 2014.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA



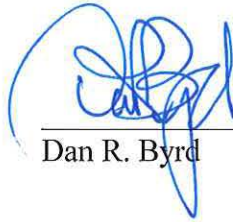
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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 February, 2014, to:

Jill Lynn Dillard
111 S. Payne St.
Stillwater, OK 74074-6215

International Fidelity Insurance Company
One Newark Center, 20th Floor
Newark, NJ 07102



Dan R. Byrd

7001 0320 0004 4248 5747

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

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



Sent To
Jill Lynn Dillard
111 S. Payne St.
Stillwater, OK 74074-6215
sms/14-0011-DIS/Cond Ord.

CERTIFIED MAIL



7001 0320 0004 4248 5747

PS Form 3800, January 2009
3625 N.W. 56th St., Ste. #100
Oklahoma City, OK 73112-4511

neopost[®] FIRST CLASS MAIL
02/12/2014
US POSTAGE \$007.19⁰

ZIP 73111
041L12202795

UTP



Jill Lynn Dillard
111 S. Payne St.
Stillwater, OK 74074-6215

RECEIVED
OKLAHOMA INSURANCE DEPARTMENT

FEB 20 2014

Legal Services

NIXIE 731 FE 1700 0002/17/14

RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD

BC: 73112451125 *2457-06229-17-00

73112@4511

7001 0320 0004 4248 5747

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

OFFICIAL



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

Total Post

Sent To: **Jill Lynn Dillard**
111 S. Payne St.
Stillwater, OK 74074-6215
sms/14-0011-DIS/Cond Ord.

PS Form 3800, January 2004

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

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:

Jill Lynn Dillard
111 S. Payne St.
Stillwater, OK 74074-6215
sms/14-0011-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

RECEIVED
OKLAHOMA INSURANCE DEPARTMENT
FEB 20 2014
Local Division

2. Article Number (Transfer from service label) **7001 0320 0004 4248 5747**



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

0253 8448 5730
 4248 0004
 7001 0320 0004

OFFICIAL USE



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

Sent To
 International Fidelity Insurance Co
 One Newark Center, 20th Floor
 Newark, NJ 07102
 sms/14-0011-DIS/Cond Ord.

PS Form 3800, January 2004 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. 	<p>A. Signature X <i>Guichard</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) S MICHAUD</p> <p>C. Date of Delivery 2-26-14</p> <p>1. Article Addressed to: International Fidelity Insurance Co One Newark Center, 20th Floor Newark, NJ 07102 sms/14-0011-DIS/Cond Ord.</p> <p>2. Article Number (Transfer from service label) 7001 0320 0004 4248 5730</p>
	<p>RECEIVED OKLAHOMA INSURANCE DEPARTMENT MAR 05 2014 Legal Division</p> <p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
PS Form 3811, February 2004 Domestic Return Receipt 102585-02-M-1540	