

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

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,
Petitioner,
vs.
BILLY DISMUKE, a licensed bail bondsman
in the State of Oklahoma,
AND
RAYMOND MERRILL, a professional bail
bondsman licensed in the State of Oklahoma,
Respondents.

FILED

OCT 10 2014

INSURANCE COMMISSIONER
OKLAHOMA

CASE NO. 14-1000-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 Dismuke (“Dismuke”) was a licensed bail bondsman in the State of Oklahoma holding license number 144708. Dismuke’s license was revoked on April 22, 2014.
3. Respondent Raymond Merrill (“Merrill”) is a licensed professional bail bondsman in the State of Oklahoma holding license number 199369.

FINDINGS OF FACT

1. On or about April 17, 2013, an appearance bond was executed as follows:

Defendant:	Anselmo Landeros
Case Number(s):	CM-2013-387
City/County:	Oklahoma County
Surety:	Raymond Merrill
Bondsman:	Billy Dismuke
Power Number(s):	5-29512
Bond Amount(s):	\$2000

2. On May 28, 2014, the Defendant failed to appear, and the bond was orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on June 17, 2014. 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. Dismuke's copy of the Order and Judgment of Forfeiture was unclaimed.

4. Merrill received a copy of the Order and Judgment of Forfeiture on June 19, 2014.

5. The ninetieth (90th) day after receipt of the Order and Judgment of Forfeiture by Respondents was Wednesday, September 17, 2014.

6. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Thursday, September 18, 2014.

7. The bond forfeiture was paid late on September 22, 2014.

8. The bond was reported as Oklahoma City Municipal bond and not Oklahoma County District Court bond.

9. 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 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.

ORDER

IT IS THEREFORE ORDERED that Billy Dismuke and Raymond Merrill are each CENSURED and **FINED** Two Hundred Fifty Dollars (\$250.00).

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 10th day of October, 2014.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in blue ink, appearing to read "Dan R. Byrd", is written over a horizontal line. The signature is stylized and includes a large loop.

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

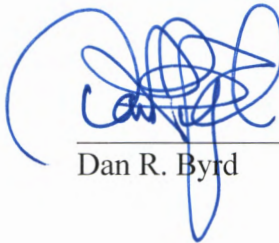
I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 10th day of October, 2014, to:

Billy Dismuke
2828 NW 57th, Ste. 119
Oklahoma City, OK 73112-7091

Certified Mail No.
7001 0320 0004 4249 4091

Raymond Merrill Bonding Company
104 N. Oak
Sallisaw, OK 74955

Certified Mail No.
7001 0320 0004 4249 4107



Dan R. Byrd

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

7001 0320 0004 4249 4107

OFFICIAL USE

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

Postmark
Here

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

Raymond Merrill Bonding Company
104 N. Oak
Sallisaw, OK 74955
rlg/14-1000-DIS/Cond. Adm. Ord.

PS Form 3800, January 2001

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 <i>Debra K. McWaters</i> X DEBRA K. McWATERS <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by <i>Printed Name</i> OCT 14 2014 C. Date of Delivery</p> <p>D. MERRILL BONDING COMPANY <input type="checkbox"/> Yes <input type="checkbox"/> No Enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>RECEIVED OKLAHOMA INSURANCE DEPARTMENT OCT 17 2014 al Division</p> <p>Raymond Merrill Bonding Company 104 N. Oak Sallisaw, OK 74955 rlg/14-1000-DIS/Cond. Adm. Ord.</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>2. Article Number (Transfer from service label)</p> <p>7001 0320 0004 4249 4107</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

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



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

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

Billy Dismuke
 2828 NW 57th, Suite 119
 Oklahoma City, OK 73112-7091
 rlg/14-1000-DIS/Cond. Adm. Ord.

PS Form 3800, January 2001

7001 0320 0004 4249 4091

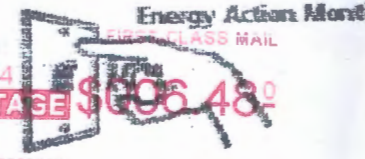
JOHN D. DOAK
Insurance Commissioner
 Oklahoma Insurance Department
 5 Corporate Plaza
 3625 N.W. 56th St., Ste. #100
 Oklahoma City, OK 73112-4511

CERTIFIED MAIL



7001 0320 0004 4249 4091

OKLAHOMA CITY OK 73112
 10/10/2014
 US POSTAGE \$6.48



ZIP 73112
 041L12203132

HW 10-14
 JM 12041

RECEIVED
 OKLAHOMA INSURANCE DEPT
 NOV 04 2014
 Legal Division

Billy Dismuke
 2828 NW 57th, Suite 119
 Oklahoma City, OK 73112-7091

NIXIE 731 SE 1700 0010/30/14
 RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD
 BC: 73112451125 *0757-04833-10-43

73112 04511

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

7001 0320 0004 4249 4091

OFFICIAL RECEIPT

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



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

Billy Dismuke
 2828 NW 57th, Suite 119
 Oklahoma City, OK 73112-7091
 rlg/14-1000-DIS/Cond. Adm. Ord.

PS Form 3800, January 2001

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:

Billy Dismuke
 2828 NW 57th, Suite 119
 Oklahoma City, OK 73112-7091
 rlg/14-1000-DIS/Cond. Adm. Ord.

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT
 NOV 04 2014
 Legal Division

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- X**
- 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 4091**