

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

STATE OF OKLAHOMA, ex rel. JOHN D.)
DOAK, Insurance Commissioner,)
Petitioner,)
vs.)
LESA WOODARD, a licensed bail bondsman)
in the State of Oklahoma,)
AND)
ALLEGHENY CASUALTY COMPANY, an)
insurance company licensed to act as bail)
surety in the State of Oklahoma,)
Respondents.)

FILED
APR 20 2015
INSURANCE COMMISSIONER
OKLAHOMA

CASE NO. 15-0400-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 Lesa Woodard ("Woodard") is a licensed bail bondsman in the State of Oklahoma holding license number 100106044.

3. Respondent Allegheny Casualty Company ("ACC") is an insurance company licensed to act as bail surety in the State of Oklahoma holding NAIC number 13285.

FINDINGS OF FACT

1. On or about September 9, 2014, an appearance bond was executed as follows:

Defendant:	Jessica Ann Stout
Case Number(s):	CF-2007-3723
City/County:	Oklahoma County Court
Surety:	Allegheny Casualty Company
Bondsman:	Lesa Woodard
Power Number(s):	AS3K-270482
Bond Amount(s):	\$2000

2. On December 16, 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 December 23, 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. Woodard received a copy of the Order and Judgment of Forfeiture on December 29, 2014.

4. ACC received a copy of the Order and Judgment of Forfeiture on December 29, 2014.

5. The ninetieth (90th) day after receipt of the Order and Judgment of Forfeiture by Respondents was Monday, March 30, 2015.

6. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Tuesday, March 31, 2015.

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.

9. The bond was reported.

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 remit payment in the face amount of the bond forfeiture within ninety-one (91) days from receipt of the Order and Judgment of Forfeiture and failing to report the bond as required by 59 O.S. §§ 1310(A)(24) and 1314(B).

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 Lesa Woodard and Allegheny Casualty 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 Oklahoma 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 Allegheny Casualty 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 Allegheny Casualty 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 30th day of April, 2015.



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

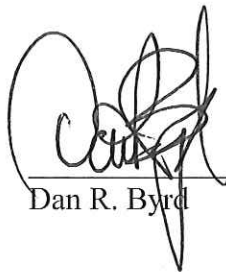
I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 20th day of April, 2015, to:

Lesa Woodard
217 N. Harvey, Ste 413
Oklahoma City, OK 73102-3802

**CERTIFIED MAIL NO:
7014 2870 0000 5493 0176**

Allegheny Casualty Company
26560 Agoura Road Ste. 100
Calabasas, CA 91311

**CERTIFIED MAIL NO:
7014 2870 0000 5493 0183**



Dan R. Byrd

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

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



Total Postage	Allegheny Casualty Company
Sent To	26560 Agoura Road, Ste. 100
Street & Apt. N. or PO Box No.	Calabasas, CA 91311
City, State, ZIP	15-0400-DIS/DRB(mt) (Cond. Adm. Ord. ~4-20-15)

PS Form 3800, July 2014

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:

Allegheny Casualty Company
26560 Agoura Road, Ste. 100
Calabasas, CA 91311
15-0400-DIS/DRB(mt)
(Cond. Adm. Ord. ~4-20-15)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Abel Moroyoqui*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

ABEL MOROYOQUI

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

☒ No. If different, delivery address below: ☐ No

3. Service Type

☒ Certified Mail®

☐ Priority Mail Express™

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 2870 0000 5493 0183

PS Form 3811, July 2013

Domestic Return Receipt

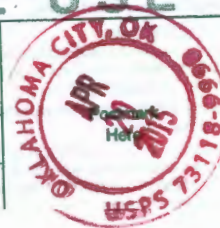
7014 2870 0000 5493 0176

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OFFICIAL USE

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



Total Postage & F

Lesla Woodard
217 N. Harvey, Ste. 413
Oklahoma City, OK 73102-3802
15-0400-DIS/DRB(mt)
(Cond.Adm.Ord. ~4-20-15)

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

PS Form 3800, July 2014

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:

OKLAHOMA INSURANCE DEPARTMENT

Lesla Woodard
217 N. Harvey, Ste. 413
Oklahoma City, OK 73102-3802
15-0400-DIS/DRB(mt)
(Cond.Adm.Ord. ~4-20-15)

APR 30 2015

Legal Division

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Lesla Woodard

☐ Agent

☒ Addressee

B. Received by (Printed Name)

Lesla Woodard

C. Date of Delivery

4/28/15

Is delivery address different from item 1? ☒ Yes

If YES, enter delivery address below: ☐ No

P.O. Box 591
OKC, OK 73101

3. Service Type

☒ Certified Mail®

☐ Priority Mail Express™

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 2870 0000 5493 0176

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