

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

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,)
Petitioner,)
vs.)
KYLE CARTER, a licensed bail bondsman in)
the State of Oklahoma,)
AND)
DUSTIN CLINT PLETCHER, a licensed)
professional bondsman in the State of)
Oklahoma,)
Respondents.)

FILED

JUL 28 2015

INSURANCE COMMISSIONER
OKLAHOMA

CASE NO. 15-0754-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 Kyle Carter (“Carter”) is a licensed bail bondsman in the State of Oklahoma holding license number 100179746.
3. Respondent Dustin Clint Pletcher (“Pletcher”) is a licensed professional bondsman in the State of Oklahoma holding license number 40070339.

FINDINGS OF FACT

1. On or about February 27, 2015, an appearance bond was executed as follows:

Defendant: Ikeva Nicole Lowman
Case Number(s): CF-2015-1270
City/County: Oklahoma County Court Clerk
Insurer: Dustin Clint Pletcher
Bondsman: Kyle Carter
Power Number(s): 1965
Bond Amount(s): \$3,000

2. On March 12, 2015, the Defendant failed to appear, and the bond was orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on March 19, 2015. 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. Carter's copy of the Order and Judgment of Forfeiture was received on March 20, 2015.

4. Pletcher's copy of the Order and Judgment of Forfeiture was received on April 6, 2015.

5. The ninetieth (90th) day after receipt of the Order and Judgment of Forfeiture by Respondents was Thursday, June 18, 2015.

6. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Friday, June 19, 2015.

7. The forfeiture was paid late on Tuesday, June 23, 2015, on the ninety-fifth (95th) day after receipt of the Order and Judgment forfeiture.

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 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 Kyle Carter and Dustin Clint Pletcher are each FINED Two Hundred Fifty Dollars (\$250.00).

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 Matt McKinnon, 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 28th day of July, 2015.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Matt McKinnon
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 28th day of July, 2015, to:

Kyle Carter
2519 SW 59th St.
Oklahoma City, Oklahoma 73119-6613

Certified Mail No.
7015 0640 0004 4933 8118

Dustin Clint Pletcher
41229 Cottage Dr.
Shawnee, OK. 74804

Certified Mail No.
7015 0640 0004 4933 8125



Matt McKinnon

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

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

OFFICIAL USE

7015 0640 0004 4933 8118

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

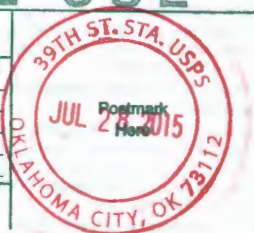
Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____



Postage \$ _____

Total Post \$ _____

Sent To
 Street and
 City, State

Kyle Carter
 2519 SW 59h St.
 OKC, OK 73119-6613
 sms/15-0754-DIS/Cond Ord

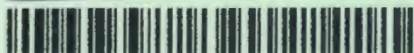
PS Form 3811, April 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Kyle Carter
 2519 SW 59h St.
 OKC, OK 73119-6613
 sms/15-0754-DIS/Cond Ord



9590 9403 0272 5155 1302 15

2. Article Number (Transfer from service label)

7015 0640 0004 4933 8118

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

B. Received by (Printed Name) *April Willis*

C. Date of Delivery *7-29-15*

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

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 0640 0004 4933 8125

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

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage \$

Total Po \$

Sent To \$

Street or P.O. Box No. _____

City, State, and ZIP+4® **sms/15-0754-DIS/Cond Ord**

Dustin Clint Pletcher
41229 Cottage Dr.
Shawnee, OK 74804

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Dustin Clint Pletcher
41229 Cottage Dr.
Shawnee, OK 74804
sms/15-0754-DIS/Cond Ord



9590 9403 0272 5155 1302 08

2. Article Number (Transfer from service label)

7015 0640 0004 4933 8125

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X [Signature] Addressee

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

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



3. Service Type
- | | |
|---|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Registered Mail™ | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Registered Mail Restricted Delivery | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Signature Confirmation Restricted Delivery | |

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt