

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

**STATE OF OKLAHOMA, ex rel. JOHN D.
DOAK, Insurance Commissioner,**)
)
)
Petitioner,)
)
vs.)
)
JASON WOODARD, a licensed bail bondsman)
in the State of Oklahoma,)
)
Respondent.)

FILED

JUL 31 2015

INSURANCE COMMISSIONER
OKLAHOMA

CASE NO. 15-0782-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 Jason Woodard (“Woodard”) is a licensed bail bondsman in the State of Oklahoma holding license number 199501.

ALLEGATIONS OF FACT

1. Respondent submitted insufficient funds for payment of reviewal fees and was censured for violating 59 O.S. § 1310(A)(29) on March 8, 2013. (Exhibit “A”).

2. Respondent submitted insufficient funds for payment of reviewal on 2013, in violation of 59 O.S. § 1310(A)(29).

3. Respondent submitted insufficient funds for payment of reviewal fees and was censured for violating 59 O.S. § 1310(A)(29) on April 9, 2015. (Exhibit “B”).

4. Respondent submitted insufficient funds for payment of reviewal fees on May 15, 2015.

5. Respondent submitted insufficient funds for payment of reviewal fees on June 15, 2015.

CONCLUSIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A) (29) for uttering multiple insufficient checks for payments received by the Commissioner from the Respondent.

2. Pursuant to 59 O.S. § 1310(B), any person violating any provision of Sections 1301 through 1340 may be subject to a civil penalty of not less than Two Hundred Fifty Dollars (\$250.00) nor more than Two Thousand Five Hundred Dollars (\$2,500.00) for each occurrence.

ORDER

IT IS THEREFORE ORDERED that Jason Woodard is **FINED** Two Hundred Fifty Dollars (\$250.00). Fine to be paid within thirty days of receipt of order. **Failure to pay fine within the thirty days allotted shall result in suspension of license.**

Respondent is further notified that he may request a hearing within 30 days of receipt of this Order, 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 Julie Meaders, Deputy General Counsel, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112, and shall specify the grounds to be relied upon as a basis for relief demanded at the hearing.

If Respondent does not request a hearing within the 30 days allotted, this Conditional Administrative Order shall become a FINAL ORDER on the 31st day following Respondent's receipt of the Order.

WITNESS My Hand and Official Seal this 31st day of July, 2015.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in blue ink that reads "Julie Meaders". The signature is written in a cursive style and is positioned above a horizontal line.


Julie Meaders
Deputy General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma 73112
Tel. (405) 521-2746

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 31st day of July, 2015 to:

Jason Woodard
217 N. Harvey Avenue
Suite 413
Oklahoma City, OK 73102

Certified Mail No.
7015-0640 0004 4933 8859


Julie Meaders
Julie Meaders

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 8859

Certified Mail Fee
 \$ _____

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

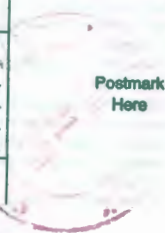
Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____



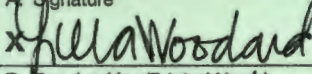
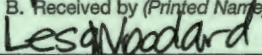

Postage
 \$ _____

Total Postage and Fees
 \$ _____

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

Jason Woodard
 217 N. Harvey Ave., Suite 413
 Oklahoma City, OK 73102
 rlg/15-0782-DIS(JAM)/Cond. Adm. Ord.

PS Form 3800, April 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>Jason Woodard 217 N. Harvey Ave., Suite 413 Oklahoma City, OK 73102 rlg/15-0782-DIS(JAM)/Cond. Adm. Ord.</p>	<p>B. Received by (Printed Name) </p> <p>C. Date of Delivery 01/3/15</p>
<p>2. Article Number (Transfer from service label) 7015 0640 0004 4933 8859</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>Legal Division</p>
<p>Barcode:  9590 9403 0272 5155 0730 55</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, April 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

paid within five days of receipt of the letter.

5. On February 13, 2013, Respondent replaced the insufficient EFT and paid the service fee owed.

CONCLUSIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A)(27) by uttering insufficient funds to the Commissioner.

ORDER

IT IS THEREFORE ORDERED that Jason Woodard is CENSURED.

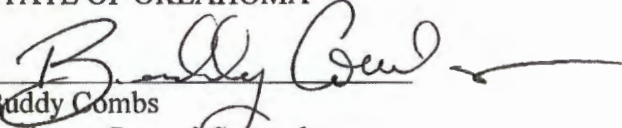
Respondent is further notified that he may request a hearing within 30 days of the receipt of this Order concerning this action and upon such request the Oklahoma Insurance Department shall conduct a hearing before an independent hearing examiner. A request for hearing shall be made in writing to Buddy 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 within 30 days of receipt of this Order, this Order shall become a **FINAL ORDER** on the 31st day, and Respondent shall be **CENSURED**.

WITNESS My Hand and Official Seal this 8th day of March, 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

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, with return receipt requested, on this 8th day of March, 2013, to:

Jason Woodard
P.O. Box 108
Oklahoma City, OK 73101-0108


Buddy Combs

Department as “Not Sufficient Funds”.

3. On February 26, 2015, Department staff sent Respondent a letter via email requesting the funds be replaced and a service fee of Twenty-Five Dollar (\$25.00) be paid within five days of receipt of the letter.

4. On March 3, 2015 the Department received personal money order number 7007958733 in the amount of Twenty Eight Dollars (\$28.00) replacing the funds and the service fee.

5. Submitting an insufficient electronic funds transfer to the Department is a violation of 59 O.S. § 1310(A)(29). The Department charges a Twenty-Five Dollar (\$25.00) service fee on all insufficient funds.

ALLEGED VIOLATIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A)(29) by uttering insufficient funds to the Commissioner.

2. Respondent has violated 59 O.S. § 1310(A)(2) by violating a law of this state relating to bail.

3. Pursuant to 59 O.S. § 1310(B), “any person violating any provision of Sections 1301 through 1340 of this title may be subject to a civil penalty of not less than Two Hundred Fifty Dollars (\$250.00) nor more than Two Thousand Five Hundred Dollars (\$2,500.00) for each occurrence.”

ORDER

IT IS THEREFORE ORDERED that Jason Woodard is **CENSURED**.

Respondent is further notified that he may request a hearing within thirty (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, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112, and state the basis for requesting the hearing.

If Respondent fails to request a hearing within thirty (30) days of receipt of this Order, this Order shall become a FINAL ORDER on the 31st day.

WITNESS My Hand and Official Seal this 9th day of April, 2015.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

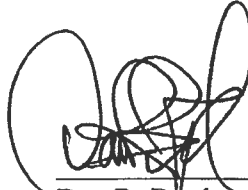
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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 9th day of April, 2015, to:

Jason Woodard
PO Box 108
Oklahoma City, OK 73101-0108

**CERTIFIED MAIL NO:
7014 2870 0000 5492 9798**



Dan R. Byrd