

Department as uncollected funds. According to the Oklahoma State Treasurer's Office, uncollected funds, are similar to insufficient funds

3. On June 29, 2015, Department staff sent Respondent a letter via email requesting the funds be replaced and a service fee of Twenty Five Dollars (\$25.00) be paid within five days of receipt of the letter.

4. On August 14, 2015, Respondent came to the Department to pay legal fines and requested a copy of the letter regarding money owed to the Bail Bond Division.

5. As of today's date the funds have not been replaced.

6. Submitting uncollected funds 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 uncollected funds.

7. Respondent and failed to replace insufficient funds in the past.

ALLEGED VIOLATIONS OF LAW

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

2. Respondent has violated 59 O.S. § 1310(A)(23) by failing to respond to a properly mailed notification within a reasonable amount of time.

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

4. 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 Stacy French is **CENSURED** and **FINED** Five Hundred Dollars (\$500.00).

IT IS FURTHER ORDERED that Stacy French shall replace the uncollected EFT and pay the service fee owed, which total Two Hundred Fifty Two Dollars and Eighty Six Cents (\$252.86).

IT IS FURTHER ORDERED that Stacy French shall take care of and resolve any outstanding matters that she has with the Department in regards to any funds that need to be replaced or fines that need to be paid with respect to any other Administrative Orders that she has received from the Department.

IT IS FURTHER ORDERED that if Stacy French fails to pay the Five Hundred Dollar (\$500.00) fine, or fails to replace the insufficient EFT uncollected and pay the service fee owed, which total Two Hundred Fifty Two Dollars and Eighty Six Cents (\$252.86), or fails to take care of and resolve any other outstanding matters that she has with the Department, including, but not limited to, any funds that need to be replaced or fines that need to be paid with respect to any other Administrative Orders that she has received from the Department within thirty (30) days of receipt of this Order that her bail bond license shall immediately be suspended and shall remain suspended until she has done so. **That any payment Respondent makes to the Department shall be made by cashier's check or money order.**

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 and the fine ordered herein shall be due.

WITNESS My Hand and Official Seal this 20th day of August, 2015.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

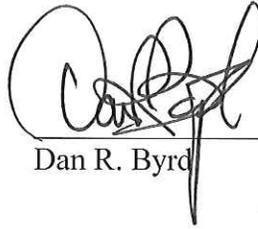
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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 21st day of August, 2015, to:

Stacy French
1330 N. Classen Blvd Ste G20
Oklahoma City, OK 73106-6837

**CERTIFIED MAIL NO:
7015 0640 0004 4933 4011**



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

7015 0640 0004 4933 4011

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®

Stacy Fench
 1330 N. Classen Blvd., Ste. G20
 Oklahoma City, OK 73106-6837
 15-0962-DIS/DRB(mt)
(Con.Adm.Ord.~8-26-15)

PS Form 3800, April 2015 PSN 7530-02-000-9047 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. 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 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Stacy Fench</u></p> <p>C. Date of Delivery <u>9/28/14</u></p>
<p>1. Stacy Fench 1330 N. Classen Blvd., Ste. G20 Oklahoma City, OK 73106-6837 15-0962-DIS/DRB(mt) (Con.Adm.Ord.~8-26-15)</p> <p>9590 9403 0272 5155 0743 28</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> <p>Legal Division</p>
<p>2. Article Number (Transfer from service label) 7015 0640 0004 4933 4011</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 type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" 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</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>