

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

FILED
NOV 23 2015
INSURANCE COMMISSIONER
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,)	
Petitioner,)	
vs.)	
)	Case No. 15-1187-DIS
STACY FRENCH, a licensed bail bondsman in the State of Oklahoma,)	
Respondent.)	

ADMINISTRATIVE ORDER

This matter is a disciplinary proceeding under the Oklahoma Bail Bond Act. The Oklahoma Insurance Department (the "Department") issued an Amended Notice of Hearing and Order to Show Cause on October 28, 2015, alleging that Respondent Stacy French ("French" or "Respondent") violated numerous provisions of the Bail Bond Act.

The hearing was set before the undersigned Hearing Examiner for November 19, 2015.

Petitioner appeared through Counsel Dan R. Byrd on November 19, 2015. Respondent failed to appear. Petitioner offered proof to support the proper service upon Respondent by certified mail at the Respondent's current address of record with the Department. Petitioner offered proof to support the allegations of fact and alleged violations of law contained in the Amended Notice of Hearing and Order to Show Cause.

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 is a licensed bail bondsman in the State of Oklahoma holding license

number 40087375.

3. The Insurance Commissioner may deny, censure, suspend, revoke, or refuse to renew any license issued pursuant to the Oklahoma Bail Bond Act and/or may levy a fine of not less than \$250.00 but not more than \$2,500.00 for each occurrence of a violation of the Oklahoma Bail Bond Act. 59 O.S. § 1310(A) and (B).

FINDINGS OF FACT

1. Respondent submitted her May 2015 Seneca Insurance Company (SIC) report and May 2015 Crum & Forster Indemnity Company (CFIC) report to the Oklahoma Insurance Department (“Department”) on Tuesday, June 16, 2015 — 1 day after the reports were due on Monday, June 15, 2015.

2. Respondent submitted her July 2015 SIC report and May 2015 CFIC report to the Department on Tuesday, August 18, 2015 — 1 day after the reports were due on Monday, August 17, 2015.

3. Respondent submitted her August 2015 SIC report and August 2015 CFIC report to the Department on Wednesday, September 16, 2015 — 1 day after the reports were due on Tuesday, September 15, 2015.

4. Respondent submitted her August 2015 Allegheny Casualty Company report to the Department on Wednesday, September 16, 2015 — 1 day after the report was due on Tuesday, September 15, 2015.

5. Respondent previously has had eleven (11) occurrences of submitting reports to the Department untimely in which administrative actions have been taken by the Department against Respondent.

CONCLUSIONS OF LAW

1. Respondent has violated 59 O.S. § 1310(A) (24) for failing to file a report as required by Section 1314.
2. Respondent has violated 59 O.S. § 1314(B), which states that “monthly reports shall be submitted electronically to the Insurance Commissioner by the fifteenth day of each month.”
3. Respondent has violated O.A.C. 365:25-5-36, which states that “Bail bondsmen are required to submit monthly reports to the Insurance Commissioner within fifteen (15) days after the end of each preceding month pursuant to 59 O.S. 1314.”
4. Respondent has violated 59 O.S. § 1310(A)(2) by violating a law of this state relating to bail.

ORDER

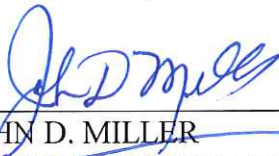
Petitioner’s testimony offered at hearing support the Allegations of Fact and Alleged Violations of Law in the Amended Notice of Hearing and Order to Show Cause as true and correct.

IT IS THEREFORE ORDERED that Stacy French is **FINED** One Thousand Five Hundred Dollars (\$1,500.00) and her bail bondsman license is **REVOKED**.

IT IS FURTHER ORDERED that Stacy French is assessed the costs of the hearing in the amount of Fifty Dollars (\$50.00), due and payable to the Oklahoma Insurance Department within thirty (30) days after the date of hearing.

WITNESS My Hand and Official Seal this 19th day of November, 2015.





JOHN D. MILLER
INDEPENDENT HEARING EXAMINER
OKLAHOMA INSURANCE DEPARTMENT

CERTIFICATE OF MAILING

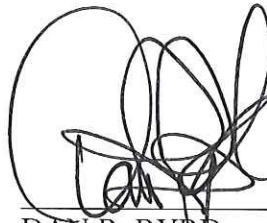
I, Dan R. Byrd, hereby certify that a true and correct copy of the above and foregoing Administrative Order was mailed via certified mail with return receipt requested, and via regular mail, on this 23rd day of November, 2015, to:

Stacy French
Stacy's Bail Bond
1125 NW 10th St.
Oklahoma City, OK 73114-5009

CERTIFIED MAIL NO: 7015 0640 0002 7406 7948

and that a copy was delivered to:

Bail Bonds Division



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

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Postage \$
 Total Postage and Fees \$
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 Street and Apt. No., or PO Box
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Stacy French
 Stacy's Bail Bonds
 1125 NW 10TH St.
 Oklahoma City, OK 73114-5009
 15-11187-DIS/DRB(mt)
 (Consent Ord. ~11-23-15)

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



JOHN D. DOAK
Insurance Commiss
 Oklahoma Insurance Dep:
 5 Corporate Plaza
 3625 N.W. 56th St., Ste. #
 Oklahoma City, OK 73112

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 RETURN TO SENDER
 NO SUCH NUMBER
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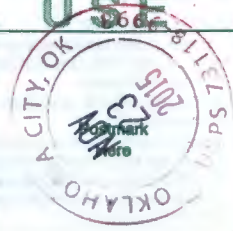
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Adult Signature Restricted Delivery \$ _____



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Stacy French
Stacy's Bail Bonds
1125 NW 10TH St.
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15-11187-DIS/DRB(mt)
(Consent Ord. ~11-23-15)

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

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.
- 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:

Stacy French
Stacy's Bail Bonds
1125 NW 10TH St.
Oklahoma City, OK 73114-5009
15-11187-DIS/DRB(mt)
(Consent Ord. ~11-23-15)



9590 9403 0272 5155 1338 03

2. Article Number (Transfer from service label)

7015 0640 0002 7406 7948

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

3. Delivery address different from item 1? Yes

IF YES, enter delivery address below: No

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DE 01 2015

3. Service Type

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