

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

**FILED**  
NOV 13 2015  
INSURANCE COMMISSIONER  
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, Insurance Commissioner,  
Petitioner,  
vs.  
MISTY DAWN GARCIA, a licensed bail bondsman in the State of Oklahoma,  
AND  
CURTIS PLETCHER, a licensed multicounty agent bondsman in the State of Oklahoma,  
Respondents.

CASE NO. 15-1289-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 Misty Dawn Garcia (“Garcia”) is a licensed bail bondsman in the State of Oklahoma holding license number 100155619.
3. Respondent Curtis Pletcher (“Pletcher”) is a licensed multicounty agent bondsman in the State of Oklahoma holding license number 199574.

**FINDINGS OF FACT**

1. On or about May 12, 2015, an appearance bond was executed as follows:

Defendant:	Breanna Lesha Dowdy
Case Number(s):	CM-2015-473 & CV-2015-33
City/County:	Payne County Court Clerk
Surety:	Curtis Pletcher
Bondsman:	Misty Dawn Garcia
Power Number(s):	80670
Bond Amount(s):	\$1000

2. On June 16, 2015, the Defendant failed to appear, and the bond was declared forfeited. An Order and Judgment of Forfeiture was issued and filed in the case on the same day by the Payne County Court Clerk. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents on June 16, 2015 with return receipt requested within thirty (30) days after the Order's filing.

3. Garcia received a copy of the Order and Judgment of Forfeiture on July 17, 2015.

4. Pletcher received a copy of the Order and Judgment of Forfeiture on July 24, 2015.

5. The ninety-first (91<sup>st</sup>) day after receipt of the Order and Judgment of Forfeiture was Friday, October 16, 2015.

6. As of the date of this Order, the bond forfeitures have not been paid or otherwise set aside or the bonds exonerated.

7. The Defendant was not returned to custody within 90 days, nor was the face amount of the forfeited bonds deposited with the Court Clerk within 91 days, after receipt of the Order and Judgment of Forfeiture by Respondents.

8. 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 by failing to return the Defendant within ninety (90) days or remit payment in the face amount of the bond forfeitures within ninety-one (91) days from receipt of the Order and Judgment of Forfeiture.

2. Pursuant to 59 O.S. § 1310(B), any bondsman 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 Misty Dawn Garcia and Curtis Pletcher are each FINED Three Hundred Dollars (\$300.00). If the fines are not paid within (30) days of receipt of this Conditional Administrative Order, Respondents' licenses will be suspended and will remain suspended until the fines are paid.

Respondents are further notified that they may request a hearing within 30 days of the receipt of this Conditional Administrative 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 Byrd, Assistant General Counsel, Oklahoma Insurance Department, Legal Division, 3625 NW 56<sup>th</sup> 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 Conditional Administrative Order shall become a FINAL ORDER on the 31<sup>st</sup> day following the receipt of the Order.**

WITNESS My Hand and Official Seal this 13<sup>th</sup> day of November, 2015.



JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

A handwritten signature in black ink, appearing to read "Dan R. Byrd", is written over a horizontal line. The signature is stylized and somewhat cursive.

DAN R. BYRD  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, Oklahoma, 73112  
Tel. (405) 521-2746  
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 13<sup>th</sup> day of November, 2015, to:

Misty Dawn Garcia  
1411 S. Fern St.  
Stillwater, OK 74074-5025

**CERTIFIED MAIL NO:  
7015 0640 0002 7406 7825**

Curtis Pletcher  
Post Office Box 66  
Springer, OK 73458-0066

**CERTIFIED MAIL NO:  
7015 0640 0002 7406 7832**



A handwritten signature in black ink, appearing to read 'DAN R. BYRD', is written over a horizontal line. The signature is stylized and somewhat cursive.

DAN R. BYRD

7015 0640 0002 7406 7825

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**OFFICIAL USE**

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® \_\_\_\_\_

Misty Dawn Garcia  
1411 S. Fern St.  
Stillwater, OK 74074-5025  
15-1289-DIS/DRB(mt)  
(11-13-15)

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:

Misty Dawn Garcia  
1411 S. Fern St.  
Stillwater, OK 74074-5025  
15-1289-DIS/DRB(mt)  
(11-13-15)



9590 9403 0272 5155 1338 58

2. Article Number (Transfer from service label)

7015 0640 0002 7406 7825

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery 11-16-15

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

OKLAHOMA INSURANCE DEPARTMENT

NOV 19 2015

Legal Division

3. Service Type

Certified Mail®

Adult Signature

Adult Signature Restricted Delivery

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

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

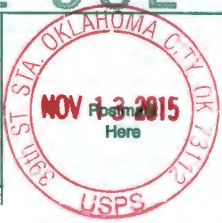
Domestic Return Receipt

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**OFFICIAL USE**

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® \_\_\_\_\_

Curtis Pletcher  
 Post Office Box 66  
 Springer, OK 73458-0066  
**15-1289-DIS/DRB(mt)**  
**(11-13-15)**

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

7015 0640 0002 7406 7832

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature                  X <i>Curt Pletcher</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)                  Curt Pletcher</p> <p>C. Date of Delivery                  NOV 13 2015</p> <p><input checked="" type="checkbox"/> Is delivery address different from item label? Yes                  If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>Legal Division</p>
<p>1. Article Addressed to:</p> <p>Curtis Pletcher                  Post Office Box 66                  Springer, OK 73458-0066  <b>15-1289-DIS/DRB(mt)</b>  <b>(11-13-15)</b></p> <p>9590 9403 0272 5155 1338 65</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Insured Mail <input type="checkbox"/>  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7015 0640 0002 7406 7832</p>	
<p>PS Form 3811, April 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>