

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED
DEC 30 2015
INSURANCE COMMISSIONER
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 PLETCHER, a professional bail)
bondsman licensed in the State of Oklahoma,)
)
Respondents.)

CASE NO. 15-1409-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 Pletcher (“Pletcher”) is a professional bail bondsman licensed in the State of Oklahoma holding license number 40070339.

FINDINGS OF FACT

1. On or about June 30, 2015, appearances bonds were executed as follows:

Defendant:	Benjamin Paul Bozworth
Case Number(s):	128249102(2), 142377861(1)
City/County:	Oklahoma City Municipal Court Clerk
Surety:	Dustin Pletcher
Bondsman:	Kyle Carter
Power Number(s):	3204 and 3206
Bond Amount(s):	\$2,400 + \$750 = \$3,150

2. On August 12, 2015, the Defendant failed to appear, and the bonds were declared forfeited. Orders and Judgments of Forfeitures were issued and filed in the case on the same day by the Oklahoma City Municipal Court. True and correct copies of the Orders and Judgments of Forfeitures were mailed to Respondents on August 14, 2015 with return receipt requested within thirty (30) days after the Orders' filing.

3. Carter received copies of the Orders and Judgments of Forfeitures on August 19, 2015.

4. Pletcher received copies of the Orders and Judgments of Forfeitures on September 15, 2015.

5. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture was Wednesday, November 18, 2015.

6. As of the date of the filing of this Conditional Administrative Order, the forfeitures have not been paid nor has the defendant been timely returned to custody.

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

amounts of the bond forfeitures within ninety-one (91) days from receipt of the Orders and Judgments of Forfeitures.

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 Kyle Carter and Dustin Pletcher are each **FINED** Five Hundred Dollars (\$500.00).

IT IS FURTHER ORDERED that the face amounts of the bond forfeitures shall be deposited with the Oklahoma City Municipal Court Clerk (or the bond forfeitures otherwise set aside or the bonds exonerated) within thirty (30) days of receipt of this Order. Failure to do so shall result in the **CANCELLATION** of Dustin Pletcher's license privilege and authorization to do business within the State of Oklahoma and **CANCELLATION** of the surety appointment of all surety bondsman agents of Dustin Pletcher.

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 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 Conditional Administrative Order shall become a FINAL ORDER on the 31st day following the receipt of the Order.

WITNESS My Hand and Official Seal this 30th day of December, 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.

DAN R. BYRD
Assistant General Counsel
3625 NW 56th 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 30th day of December, 2015, to:

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

**CERTIFIED MAIL NO:
7015 0640 0002 7406 3544**

Dustin Pletcher
12844 Acme Rd.
Shawnee, OK 74804-9194

**CERTIFIED MAIL NO:
7015 0640 0002 7406 3551**



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

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
 \$ _____

Kyle Carter
 2519 SW 59TH St.
 Oklahoma City, OK 73119-6613
15-1409-DIS/DRB(mt)
(Cond.Ad.Ord. & Notice~12-30-15)

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

See Reverse for Instructions.

7015 0640 0002 7406 3544

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 59TH St.
 Oklahoma City, OK 73119-6613
15-1409-DIS/DRB(mt)
(Cond.Ad.Ord. & Notice~12-30-15)



9590 9403 0272 5155 1342 51

2. Article Number (Transfer from service label)

7015 0640 0002 7406 3544

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Alex Tate Addressee

B. Received by (Printed Name) *Alex Tate* C. Date of Delivery *12-31-15*

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

OKLAHOMA INSURANCE DEPARTMENT

JAN 05 2016

Legal Division

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____



7015 0640 0002 7406 3551

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

Dustin Pletcher
 12844 Acme Rd.
 Shawnee, OK 74804-9194
15-1409-DIS/DRB(mt)
(Cond.Ad.Ord. & Notice~12-30-15)

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:

Dustin Pletcher
 12844 Acme Rd.
 Shawnee, OK 74804-9194
15-1409-DIS/DRB(mt)
(Cond.Ad.Ord. & Notice~12-30-15)



9590 9403 0272 5155 0720 10

2. Article Number (Transfer from service label)

7015 0640 0002 7406 3551

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

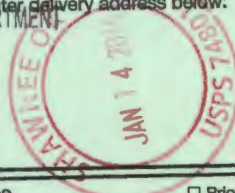
B. Received by (Printed Name)
 C. Date of Delivery

delivery address different from item 1? Yes
 No

RECEIVED BY YES, enter delivery address below:

JAN 19 2016

Legal Division



3. Service Type
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- 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