

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

**FILED**

MAY 12 2016

INSURANCE COMMISSIONER  
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. )  
DOAK, Insurance Commissioner, )  
Petitioner, )  
vs. )  
DEBORAH ACKERMAN, a licensed bail )  
bondsman in the State of Oklahoma, )  
AND )  
ACCREDITED SURETY AND CASUALTY )  
COMPANY, an insurance company licensed to act )  
as bail surety in the State of Oklahoma, )  
Respondents. )

CASE NO. 16-0476-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. §§ 1301-1341.
2. Respondent Deborah Ackerman (“Ackerman”) is a licensed bail bondsman in the State of Oklahoma holding license number 40001406.
3. Respondent Accredited Surety and Casualty Company. (“ASCC”) is an insurance company licensed to act as bail surety in the State of Oklahoma holding NAIC number 26379.

**FINDINGS OF FACT**

1. On or about April 7, 2015, an appearance bond was executed as follows:

Defendant: Jarrett Edward Johnson  
Case Number(s): CM-2015-100  
City/County: Woods County Court Clerk  
Surety: Accredited Surety and Casualty Company  
Bondsman: Deborah Ackerman  
Power Number(s): BB-5277137  
Bond Amount(s): \$2500

2. On January 14, 2016, the Defendant failed to appear, and the bond was orally declared forfeited. An Order and Judgment of Forfeiture was filed by the court on January 21, 2016. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents with return receipt requested within thirty (30) days after the Order's filing.

3. Ackerman received a copy of the Order and Judgment of Forfeiture on January 29, 2016.

4. ASCC received a copy of the Order and Judgment of Forfeiture on January 25, 2016.

5. The ninety-first (91<sup>st</sup>) day after receipt of the Order and Judgment of Forfeiture by Respondents was Friday, April 29, 2016.

6. As of the date of this Order, the bond forfeiture has not been paid or otherwise set aside or the bond exonerated.

7. The Defendant was not returned to custody within 90 days, nor was the face amount of the forfeited bond 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(D) by failing to return the Defendant within ninety (90) days or remit payment in the face amount of the bond forfeiture within ninety-one (91) days from receipt of the Order and Judgment of

Forfeiture.

2. Pursuant to 59 O.S. § 1310(B), any bondsman or company 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.

3. Pursuant to 59 O.S. § 1332(D)(4)(a), when a surety company does not properly deposit with the court clerk the face amount of the forfeited bond, the Commissioner shall “cancel the license privilege and authorization of the insurer to do business within the State of Oklahoma and cancel the surety appointment of all surety bondsman agents of the insurer.

4. Pursuant to 59 O.S. § 1316(D), all surety bondsmen or managing general agents shall attach a completed power of attorney to the appearance bond that is filed with the court clerk on each bond written. Echols violated 59 O.S. § 1316(D) when she failed to sign the power of attorney on the appearance bond.

**ORDER**

**IT IS THEREFORE ORDERED** that Deborah Ackerman and Accredited Surety and Casualty Company are each **CENSURED** and **FINED** Three Hundred Fifty Dollars (\$350.00).

**IT IS FURTHER ORDERED** that the face amount of the bond forfeiture shall be deposited with the Woods County Court Clerk (or the bond forfeiture otherwise set aside or the bond exonerated) within thirty (30) days of receipt of this Order. Failure to do so shall result in the **CANCELLATION** of Accredited Surety and Casualty Company’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 Accredited Surety and Casualty Company.

Respondents are further notified that they 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 Dan R. 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 have not paid the fines ordered herein and do not request a hearing within the thirty (30) days allotted, this Order shall become a FINAL ORDER on the thirty-first (31<sup>st</sup>) day following the receipt of the Order, Respondents' license shall be immediately suspended, and the fines ordered herein shall be due.**

WITNESS My Hand and Official Seal this 12<sup>th</sup> day of May, 2016.



JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

A handwritten signature in black ink, appearing to read "Dan R. Byrd", written over a horizontal line.

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

**CERTIFICATE OF MAILING**

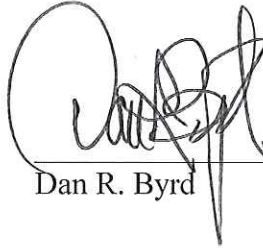
I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 12<sup>th</sup> day of May, 2016, to:

Deborah Ackerman  
P.O. Box 283  
Alva, OK 73717

**CERTIFIED MAIL NO:  
7015 3010 0001 4736 6419**

Accredited Surety and Casualty Company  
ATTN: Bail Bond Division  
P.O. Box 140855  
Orlando, FL 32814

**CERTIFIED MAIL NO:  
7015 3010 0001 4736 6426**



\_\_\_\_\_

Dan R. Byrd

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://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**

\$ \_\_\_\_\_

Sent To

Street and Apt. No., or PO Box

City, State, ZIP+4®

Deborah Ackerman  
 P.O. Box 283  
 Alva, OK 73717  
**16-0476-DIS/DRB(mt)**  
**(Cond. Adm. Ord. & Notice~5-12-16)**



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

7015 3010 0001 4736 6419

**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:

Deborah Ackerman  
 P.O. Box 283  
 Alva, OK 73717  
**16-0476-DIS/DRB(mt)**  
**(Cond. Adm. Ord. & Notice~5-12-16)**



9590 9402 1346 5285 6031 17

2. Article Number (Transfer from service label)

7015 3010 0001 4736 6419

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*x Dackerman*  Agent  
 Addressee

B. Received by (Printed Name)

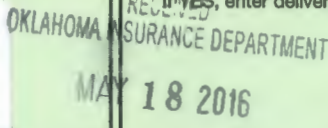
*Dackerman*

C. Date of Delivery

*5-16-16*

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No



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, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
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For delivery information, visit our website at [www.usps.com](http://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**  
 \$ \_\_\_\_\_

Sent To  
 \_\_\_\_\_

Street and Apt. No., or PO Box No.  
 \_\_\_\_\_

City, State, ZIP+4®  
 \_\_\_\_\_

Accredited Surety And Casualty Company  
 Attn: Bail Bond Division  
 P.O. Box 140855  
 Orlando, FL 32814  
 16-0476-DIS/DRB(mt)  
 (Cond. Adm. Ord. & Notice~5-12-16)



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

7015 3010 0001 4736 6426

**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:

Accredited Surety And Casualty Company  
 Attn: Bail Bond Division  
 P.O. Box 140855  
 Orlando, FL 32814  
 16-0476-DIS/DRB(mt)  
 (Cond. Adm. Ord. & Notice~5-12-16)



9590 9402 1346 5285 6031 24

2. Article Number (Transfer from service label)  
 7015 3010 0001 4736 6426

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *J. Kamey*  Agent  
 Addressee

B. Received by (Printed Name)  
*J. Kamey*

C. Date of Delivery  
 \_\_\_\_\_

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

OKLAHOMA INSURANCE DEPARTMENT  
 MAY 20 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  Signature Confirmation Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt