

FINDINGS OF FACT

1. On or about April 1, 2016, appearance bonds were executed as follows:

Defendant:	Billy Tywan Kellogg
Case Number(s):	CM-2016-56
City/County:	Craig County Court Clerk
Surety:	Brad Allen Anderson
Bondsman:	Randall Eugene Billings
Power Number(s):	0300
Bond Amount(s):	\$623

2. On April 6, 2016, 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 April 14, 2016 by the Craig County Court Clerk. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents on April 14, 2016, with return receipt requested within thirty (30) days after the Order's filing.

3. Billings received a copy of the Order and Judgment of Forfeiture per USPS form 3811, green card signed but not dated, no data on www.usps.com.

4. Anderson received a copy of the Order and Judgment of Forfeiture per USPS form 3811, green card signed but not dated, per www.usps.com delivered on April 15, 2016.

5. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture was Friday, July 15, 2016.

6. The bond forfeiture was paid late on August 5, 2016.

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 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 Randall Eugene Billings and Brad Allen Anderson are each FINED Two Hundred Fifty Dollars (\$250.00).

IT IS FURTHER ORDERED that the face amount of the bond forfeiture shall be deposited with the Craig 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 Brad Allen Anderson'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 Brad Allen Anderson.

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 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 (31st) 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 16th day of August, 2016.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in blue 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

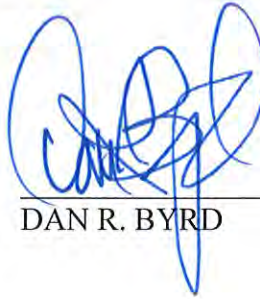
I hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to Be Heard* was mailed certified, return receipt requested, on this 10th day of August, 2016, to:

Randall Eugene Billings
36 E. BJ Tunnell Blvd.
Miami, OK 74354-3302

**CERTIFIED MAIL NO:
7016 0910 0000 5833 7866**

Brad Allen Anderson
36 E. BJ Tunnell Blvd.
Miami, OK 74354-3302

**CERTIFIED MAIL NO:
7016 0910 0000 5833 7873**



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
 \$ _____

Sent To

Street and Apt. No., or P.O. Box

City, State, ZIP+4®



Randall Eugene Billings
 36 E. BJ Tunnel Blvd.
 Miami, OK 74354-3302
16-0733-DIS/DRB(mt)
(Cond. Adm. Ord. & Notice~ 8-10-16)

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 checked="" type="checkbox"/> <i>Randy Billings</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <i>8/12</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px;"> Randall Eugene Billings 36 E. BJ Tunnel Blvd. Miami, OK 74354-3302 16-0733-DIS/DRB(mt) (Cond. Adm. Ord. & Notice~ 8-10-16) </div> <p>9590 9402 1736 6074 9184 97</p>	<div style="text-align: center;"> <p>RECEIVED</p> <p>OKLAHOMA INSURANCE DEPARTMENT</p> <p>AUG 16 2016</p> <p>Legal Division</p> </div>
<p>2. Article Number (Transfer from service label) 7016 0910 0000 5833 7866</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 checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input 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>
PS Form 3811, July 2015 PSN 7530-02-000-9053	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 \$ _____
 Sent To _____
 Street and Apt. No., or PO Box _____
 City, State, ZIP+4® _____



Brad Allen Anderson
 36 BJ Tunnel Blvd.
 Miami, OK 74354-3302
16-0733-DIS/DRB(mt)
(Cond. Adm. Ord. & Notice~ 8-10-16)

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

7016 0910 0000 5833 7873

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:
 Brad Allen Anderson
 36 BJ Tunnel Blvd.
 Miami, OK 74354-3302
16-0733-DIS/DRB(mt)
(Cond. Adm. Ord. & Notice~ 8-10-16)

2. Article Number (Transfer from service label)
7016 0910 0000 5833 7873

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Randy Bellamy* Agent Addressee
 B. Received by (Printed Name) _____ C. Date of Delivery _____

1. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below: _____
RECEIVED
OKLAHOMA INSURANCE DEPARTMENT
AUG 16 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)
 Insured Mail Restricted Delivery (over \$500)

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