

5. Pursuant to 59 O.S. § 1310(B), in addition to any potential denial, censure, suspension, or revocation, any person violating any provision of the Oklahoma Bail Bond Act may be subject to a civil penalty of not less than Two Hundred Fifty Dollars (\$250.00) nor more than Two Thousand Five Hundred Dollars (\$2,500.00) for each occurrence.

6. Pursuant to 59 O.S. § 1332(D)(4)(a), the Insurance Commissioner shall immediately cancel the license privilege and authorization of the insurer to do business within the State of Oklahoma and cancel the appointment of all surety bondsman agents of the insurer who are licensed by Section 1301 et seq. of this title.

7. If Respondents request a hearing in writing in this matter, pursuant to OAC 365:1-7-1, the Insurance Commissioner, pursuant to 36 O.S. § 319, will appoint an independent hearing examiner who shall sit as a quasi-judicial officer and preside over the hearing requested by Respondents.

8. The Insurance Commissioner, pursuant to OAC 365:1-7-5, upon written request reasonably made by a person affected by the hearing and at such person's expense, shall cause a full stenographic record of the proceedings to be made by a competent court reporter.

ALLEGATIONS OF FACT

1. On or about October 5, 2015, an appearance bond was executed as follows:

Defendant:	Joseph Valenti III
Case Number(s):	CM-2015-1229
City/County:	Comanche County
Surety:	American Contractors Indemnity Co.
Bondsman:	Timothy Pearson
Power Number(s):	A15-2200551
Bond Amount(s):	\$2,500.00

2. On March 28, 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 April 1, 2016 by the Comanche County Court. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents on April 1, 2016 with return receipt requested.

3. Pearson received a copy of the Order and Judgment of Forfeiture on April 6, 2016.
4. ACIC received a copy of the Order and Judgment of Forfeiture on April 4, 2016.
5. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture was July 6, 2016.
6. On July 5, 2016, the Court entered an Order to Stay Payment of the forfeiture until September 30, 2016.
7. As of the date of the filing of this Conditional Administrative Order, the forfeiture has not been paid and the defendant has not been returned to custody.

ALLEGED CONCLUSIONS OF LAW

1. Respondents have violated *59 O.S. § 1332* by failing to return the Defendant within ninety (90) days as specifically stated in subsection 4(c) of the statute 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.

ORDER

IT IS THEREFORE ORDERED that Pearson and ACIC are each FINED One Thousand Dollars (\$1,000.00). The fines are to be paid within thirty (30) days made payable to the Oklahoma Insurance Department. Payment may be made by either cashier's check or money order and sent to the Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112. If the fines are

not paid within thirty (30) days, Pearson's license will be suspended and shall remain suspended until the fines are paid in full.

IT IS FURTHER ORDERED that the face amount of the bond forfeiture shall be deposited with the Comanche County District 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 ACIC'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 ACIC.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that this Order is a Conditional Order. Unless the Respondents request a hearing with respect to the Allegations of Fact set forth above within thirty (30) days of the date of mailing of this Order, this Order and the penalties set forth above shall become a Final Order on the thirty-first day following the date of mailing this Order. A request for hearing should be in writing addressed to Sara A. Worten, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112. The request for hearing must state the grounds for the request to set aside or modify the Order.

Any such hearing shall be conducted according to the procedures for contested cases under the Insurance Code and 75 O.S. § 250-323. If the Respondents serve a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as notice of the matters to be reviewed at the hearing, and the Allegations of Fact, Alleged Violations of Law, and penalties imposed in this Conditional Order shall be considered withdrawn, pending final

resolution at the hearing.

WITNESS My Hand and Official Seal this 24th day of October, 2016.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA



Sara A. Worten

Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 521-0125
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 by regular mail and by certified mail, with postage prepaid and return receipt requested, on this 24th day of October 2016, to:

Timothy Pearson
P.O. Box 2982
Lawton, OK 73502-2982


CERTIFIED MAIL NO. 7016 0910 0000 5833 3622

American Contractors Indemnity Company
601 S. Figueroa Street, Suite 1600
Los Angeles, CA 90017-5721

CERTIFIED MAIL NO. 7016 0910 0000 5833 3639

and a copy was delivered to:

Anna Denman
Bail Bonds Division


Sara A. Worten
Assistant General Counsel

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 Timothy Pearson
 P.O. Box 2982
 Lawton, OK 73502-2982
 Street and Apt. No., or PO Box **16-0981-DIS/SAW(mt)**
 (Cond. Adm. Ord. & Notice ~10-24-16)
 City, State, ZIP+4® _____

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

7016 0910 0000 5833 3622

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:
 Timothy Pearson
 P.O. Box 2982
 Lawton, OK 73502-2982
16-0981-DIS/SAW(mt)
 (Cond. Adm. Ord. & Notice ~10-24-16)



2. Article Number (Transfer from service label)
7016 0910 0000 5833 3622

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Tim Pearson Agent Addressee

B. Received by (Printed Name) *Tim Pearson*
 C. Date of Delivery *10/26/16*

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

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT
 OCT 31 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