

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.

ALLEGATIONS OF FACT

1. On or about August 11, 2016, an appearance bond was executed as follows:

Defendant:	Christopher Copeland
Case Number(s):	CM-2016-2284
City/County:	Oklahoma County
Surety:	Dustin Pletcher
Bondsman:	Alexandra Tate
Power Number(s):	7477
Bond Amount(s):	\$1,000.00

2. On December 1, 2016, the Defendant failed to appear in CM-2016-2284 and the bond was declared forfeited. An Order and Judgment of Forfeiture was issued and filed in the case by the Oklahoma County District Court. A true and correct copy of the Order and Judgment of the Forfeiture in CM-2016-2284 was mailed to Respondents on December 9, 2016 with return receipt requested.

3. Pletcher received a copy of the Order with the return filed on December 13, 2016.

4. Tate received a copy of the Order with the return filed on December 16, 2016.

5. The ninety-first (91st) day after receipt of the Orders was March 16, 2017.

6. As of the date of the filing of this Conditional Administrative Order, the forfeiture has not been paid.

ALLEGED VIOLATIONS OF LAW

1. Respondents Pletcher and Tate have failed to comply with 59 O.S. § 1332(D)(1) 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 in CM-2016-2284, which is a violation under 59 O.S. § 1310(A)(2).

2. Pursuant to 59 O.S. § 1310(B), any bondsman violating a provision of the Bail Bond Act, 59 O.S. §§ 1301-1341, may be subject to a fine of not less than Two Hundred and Fifty Dollars (\$250.00) but not more than Two Thousand and Five Hundred Dollars (\$2,500.00) per violation.

ORDER

IT IS THEREFORE ORDERED that Pletcher and Tate are each **FINED** Five Hundred and No/100 Dollars (\$500.00). 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.

IT IS FURTHER ORDERED that Respondents Pletcher and Tate are to pay the forfeiture in Oklahoma County case number CM-2016-2284, State v. Christopher Copeland. If the forfeiture is not paid within thirty (30) days, pursuant to 59 O.S. § 1332(D), the Oklahoma Insurance Department is ordered to withdraw the face amount of the bond, One Thousand and No/100 Dollars (\$1,000.00), from Pletcher's multicounty bail bondsman certificate of deposit and forward it to the Oklahoma County Court Clerk for payment of the bond forfeiture.

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 Lisa M. Torneten, 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 18th day of April, 2017.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

A handwritten signature in black ink, appearing to read "Lisa M. Torneten".

Lisa M. Torneten
Assistant General Counsel
3625 NW 56th 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 by regular mail and by certified mail, with postage prepaid and return receipt requested, on this 18th day of April 2017, to the following:

Alexandra Tate
2519 SW 59th St.
Oklahoma City, OK 73119

CERTIFIED MAIL NO. 7016 0910 0000 8401 4038

Dustin Pletcher
12844 Acme Road
Shawnee, OK 74804-9194

CERTIFIED MAIL NO. 7016 0910 0000 8401 4045

and a copy was delivered to:

Lewis Garrison
Bail Bonds Division



Lisa M. Torneten
Assistant General Counsel

U.S. Postal Service™
CERTIFIED MAIL® 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®

Dustin Pletcher
 12844 Acme Road
 Shawnee, OK 74804-9194
17-0220-DIS/LMT(mt)
(Cond. Adm. Ord. & Notice ~4-18-17)

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

7016 0910 0000 8401 4045

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>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Dustin Pletcher 12844 Acme Road Shawnee, OK 74804-9194 17-0220-DIS/LMT(mt) (Cond. Adm. Ord. & Notice ~4-18-17)</p>		<p>B. Received by (Printed Name) <input checked="" type="checkbox"/> <i>[Signature]</i> C. Date of Delivery APR 20 2017</p>	
<p>2. Article Number (Transfer from service label) 7016 0910 0000 8401 4045</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 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 (over \$500)</p>	
<p>OKLAHOMA INSURANCE DEPARTMENT RECEIVED APR 20 2017 Legal Division</p>		<p>4. Delivery address different from item 1? <input type="checkbox"/> Yes 5. Delivery address below: <input type="checkbox"/> No</p>	

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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®



Alexandra Tate
 2519 SW 59TH St.
 Oklahoma City, OK 73119
17-0220-DIS/LMT(mt)
(Cond. Adm. Ord. & Notice -4-18-17)

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

7016 0910 0000 8401 4038

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:

Alexandra Tate
 2519 SW 59TH St.
 Oklahoma City, OK 73119
17-0220-DIS/LMT(mt)
(Cond. Adm. Ord. & Notice -4-18-17)



9590 9402 2617 6336 1425 33

2. Article Number (Transfer from service label)

7016 0910 0000 8401 4038

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

Alexandra Tate

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

Alex Tate *4-19-17*

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT
 APR 20 2017
 Legal Division

IF YES, ENTER: 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