

The allegations are found to be true and correct, and Respondent has violated 59 O.S. § 1314(B), which states that “[e]very licensed bondsman shall file monthly electronically with the Insurance Commissioner” Any person violating this provision may be subject to a civil penalty ranging from \$250 to \$2,500. 59 O.S. § 1310(B).

ORDER

IT IS THEREFORE ORDERED that James Todd Kimrey is fined Two Hundred Fifty Dollars (\$250.00).

Respondent is further notified that he 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 Michael P. Copeland, Oklahoma Insurance Department, Legal Division, 3625 NW 56th Suite 100, Oklahoma City, Oklahoma 73112, and state the basis for requesting the hearing.

If Respondent does not request a hearing within the 30 days allotted, this Order shall become a FINAL ORDER on the 31st day following the receipt of the Order and the fine ordered herein shall be due.

WITNESS My Hand and Official Seal this 2nd day of January, 2012.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Michael P. Copeland
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112

Tel. (405) 521-2746
Fax (405) 521-0125

CERTIFICATE OF SERVICE

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 20th day of January, 2012, to:

James Todd Kimrey
177 E 7th Street
Pawhuska, OK 74056-4213

**CERTIFIED MAIL NO:
7008 1830 0003 9411 8573**



Michael P. Copeland

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

James Todd Kimrey
177 E. 7th Street
Pawhuska, OK 74056-4213

12-0083-DIS/MPC(mt)Con. Adm. Ord.

OKLAHOMA

JAN 31 2012

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Jessica Boone* Agent
 Addressee
B. Received by (Printed Name) *Jessica Boone* C. Date of Delivery *1-27-12*
D. Is delivery address different from item 1? Yes
 No enter delivery address below: No

RECEIVED INSURANCE DEPARTMENT

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7008 1830 0003 9411 8573**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™
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OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage &		

Sent To James Todd Kimrey
177 E. 7th Street
Pawhuska, OK 74056-4213
Street, Apt. No., or PO Box No.
City, State, ZIP+4 12-0083-DIS/MPC(mt)Con. Adm. Ord.

Postmark Here: *JAN 26 2012*
OKLAHOMA OK 73105

PS Form 3800, August 2006 See Reverse for Instructions

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