

or money order within five (5) days of receipt of the letter.

3. Respondent received the letter on April 3, 2012.

4. On April 11, 2012, Respondent replaced the insufficient funds with cashier's check number 187099.

5. Respondent has a history of submitting insufficient funds to the Department.

CONCLUSION OF LAW

1. Respondent acted in violation of 59 O.S. § 1310(A)(27) by uttering insufficient funds to the Insurance Commissioner.

2. Pursuant to 59 O.S. § 1310(B), any bondsman violating the Bail Bond Act may be subject to a civil penalty ranging from \$250 to \$2,500.

ORDER

IT IS THEREFORE ORDERED that James R. Willis 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 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. **Such written request shall include an explanation of Respondent's actions described herein and any defenses thereto.**

If Respondent does not request a hearing within the 30 days allotted, this Order shall be 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 23 day of April, 2012.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

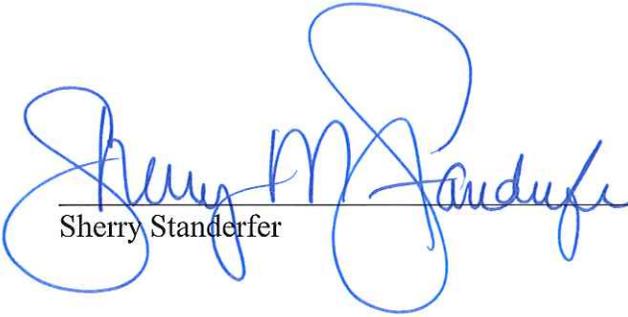
A handwritten signature in black ink, appearing to read "Michael P. Copeland", written over a horizontal line.

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 27th day of April, 2012, to:

James Reginal Willis
303 K Street NW
Ardmore, OK 73401-4307



Sherry Standerfer

OFFICIAL MAIL

7001 0320 0004 4250 4202

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



Total Postage

James Reginal Willis
 303 K Street NW
 Ardmore, OK 73401-4307
 sms/12-0352-DIS/Cond. Ord.

PS Form 3800, January 2001
 See reverse for instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS; FOLD AT DOTTED LINE

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 Reginal Willis
 303 K Street NW
 Ardmore, Ok 73401-4307
 sms/12-0352-DIS/Cond. Ord.

2. Article Number
 (Transfer from service label)

7001 0320 0004 4250 4202

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) Yes

Oklahoma Insurance Department
Legal Division
5 Corporate Plaza
3625 N.W. 56th Street, Suite 100
Oklahoma City, OK. 73112

CERTIFIED MAIL



7001 0320 0004 4250 4202



U.S. POSTAGE PITNEY BOWES

ZIP 73112 \$ 005.75⁰
02 1W
0001363374 APR 27 2012



James Reginal Willis
303 K Street NW
Ardmore, Ok 73401-4307

NIXIE 731 DE 1 00 05/06/12 ^{WR}UTF

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 73112451125 *2557-01699-30-3!

7340124511

