

Defendant:	Latonya Renya Fleming
Case Number(s):	CF-2010-3269
City/County:	Oklahoma County
Surety:	Safety National Casualty Corporation
Bondsman:	Billy Dismuke
Power Number(s):	S5-2006924
Bond Amount(s):	\$2,000

2. On March 6, 2012, the Defendant failed to appear, and the bond was declared forfeited. An Order and Judgment of Forfeiture was issued by the court on March 21, 2012, and filed in the case. A true and correct copy of the Order and Judgment of Forfeiture was mailed to Respondents with return receipt requested within thirty (30) days after the forfeiture.

3. Dismuke received a copy of the Order and Judgment of Forfeiture on April 4, 2012.

4. SNCC received a copy of the Order and Judgment of Forfeiture on March 26, 2012.

5. The ninety-first (91st) day after receipt of the Order and Judgment of Forfeiture by Respondents was Thursday, July 5, 2012. The Defendant was not returned to custody within 90 days, nor was the face amount of the forfeited bond deposited with the Court Clerk on the 91st day after receipt of the Order and Judgment of Forfeiture.

6. As of the date of this Order, the bond forfeiture has not been paid or otherwise set aside or the bond exonerated.

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 forfeiture within ninety-one (91) days from receipt of the Order and Judgment of Forfeiture.

2. Pursuant to 59 O.S. § 1310(B), any bondsman or company 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.

3. Pursuant to 59 O.S. § 1332(D)(4)(a), when a surety company does not properly deposit with the court clerk the face amount of the forfeited bond, the Commissioner shall “cancel the license privilege and authorization of the insurer to do business within the State of Oklahoma and cancel the surety appointment of all surety bondsman agents of the insurer.”

ORDER

IT IS THEREFORE ORDERED that Billy Dismuke and Safety National Casualty Corporation are each CENSURED and FINED in the amount of Two Hundred Fifty Dollars (\$250.00).

IT IS FURTHER ORDERED that the face amount of the bond forfeiture shall be deposited with the Oklahoma 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 Safety National Casualty Corporation’s license privilege and authorization to do business within the State of Oklahoma and the CANCELLATION of the surety appointment of all surety bondsman agents of Safety National Casualty Corporation.

Respondents are further notified that they 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 William G. “Buddy” Combs, 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 do 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 fines ordered herein shall be due.

WITNESS My Hand and Official Seal this 25th day of October, 2012.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

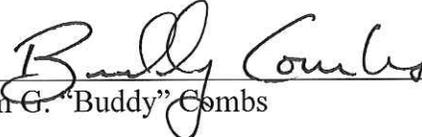

William G. "Buddy" Combs
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 521-2746
Fax (405) 521-0125

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 25th day of October, 2012, to:

Billy Dismuke
7204 NW 121st Street
Oklahoma City, OK 73162-1664

Safety National Casualty Corporation
ATTN: Jeffrey Otto
1832 Schuetz Rd.
St. Louis, MO 63146-3540



William G. "Buddy" Combs

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0003 9967 8728

OFFICIAL RECEIPT



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

Sent To
 Street, Apt. or PO Box #
 City, State, Zip

Billy Dismuke
 7204 NW 121st Street
 OKC, Ok 73162-1664
 sms/12-0921-DIS/COND. ORD.

PS Form 3800, January 2007 PSN 7530-01-000-9000 Use reverse for Instructions

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:

Billy Dismuke
 7204 NW 121st Street
 OKC, Ok 73162-1664
 sms/12-0921-DIS/COND. ORD.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *Billy Dismuke*

B. Received by (Printed Name) Agent Addressee
 Tracy Bias

C. Date of Delivery
 11/9

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

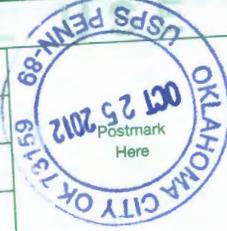
3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail Signature Required

4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number (Transfer from service label) 7001 0320 0003 9967 8728

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL



7001 0320 0003 9967 8735

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

Total **1** Safety National Casualty Corp.
 Sent To **Attn: Jeffrey Otto**
 Street / or PO Box **1832 Schuetz Rd.**
 City, State **St. Louis, MO 63146-3540**
sms/12-0921-DIS/Cond. Ord.

PS Form 3800, January 2001

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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- 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:

Safety National Casualty Corp.
 Attn: Jeffrey Otto
 1832 Schuetz Rd.
 St. Louis, MO 63146-3540
 sms/12-0921-DIS/Cond. Ord.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) **Joe Bauer** C. Date of Delivery **OCT 29 2012**

Is delivery address different from item 1? Yes
 No

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT

NOV 01 2012

Legal Division

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) **7001 0320 0003 9967 8735**