

the Defendant Kalour Green. Respondent has not returned the Two Thousand Five Hundred Ninety-Five Dollars (\$2,595.00) to Ms. Hardiman.

2. On July 11, 2014, Department Bail Bond staff visited Respondent at his office at 809 N. Classen Blvd., Oklahoma City, Oklahoma and spoke with Respondent who acknowledged receipt of the money from Ms. Hardiman and advised the he would pay her soon.

3. On July 23, 2014, Department Bail Bond staff sent a letter to Respondent advising him that he had acknowledged that he owed Ms. Hardiman the money and would pay her soon, and that he had agreed to advise the Department and provide documentation of the payment to the Department. The Department's letter further advised Respondent that it was a violation of 59 O.S. § 1310(A)(4) to withhold money belonging to insurers, insureds, or others received in the conduct of business under his license.

4. On September 18, 2014, Department staff called Respondent who advised that he had mailed money orders to Ms. Hardiman and was waiting on a letter from her acknowledging receipt of the money orders. Department staff discussed with Respondent the importance of responding to Department letters and emails.

5. On September 22, 2014, Department staff called Ms. Hardiman who advised that she had not received any letter or money orders from Respondent.

6. On October 22, 2014, Department staff called Respondent who after speaking a short time appeared to hang up the phone. Department staff called Respondent back who advised that as soon as he got back to his office he would email a response to the Department. Respondent has not responded to the Department's letter, email or phone calls and has not paid Ms. Hardiman the money he has admitted that he owes to her.

CONCLUSIONS OF LAW

7. Respondent has violated 59 O.S. § 1310(A)(4) for misappropriation, conversion, or unlawful withholding of monies or property belonging to insurers, insureds, or others received in the conduct of business under his bail bond license.

8. Respondent has violated 59 O.S. § 1310(A)(2) for violation of any laws of this state or any lawful rule, regulation, or order of the Commissioner relating to bail.

9. Pursuant to 59 O.S. § 1310(B), "any person violating any provision of Sections 1301 through 1340 of this title 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."

ORDER

IT IS THEREFORE ORDERED that Rico M. Peterson is **CENSURED** and **FINED** Two Hundred-Fifty Dollars (\$250.00) for unlawfully withholding monies owed to Ms. Hardiman in the conduct of business under his bail bond license.

IT IS FURTHER ORDERED that Rico M. Peterson shall pay Misty Hardiman Two Thousand Five Hundred Ninety-Five Dollars (\$2,595.00) and provide documentation of such payment to the Department.

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 Dan R. Byrd, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., 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.

WITNESS My Hand and Official Seal this 31st day of October, 2014.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

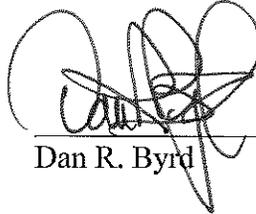
A handwritten signature in black ink, appearing to read "Dan R. Byrd", is written over a horizontal line. The signature is stylized and includes a large loop on the left side.

Dan R. Byrd
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 certified, return receipt requested, on this 31st day of October, 2014, to:

Rico M. Peterson
809 N. Classen Blvd
Oklahoma City, OK 73106-7223



Dan R. Byrd

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

7014 0150 0001 9588 5105

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



Sent To
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

Rico M. Petron
 809 N. Classen Blvd.
 OKC, OK 73106-7223
sms/14-1046-DIS/Cond Ord

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p>Rico M. Petron 809 N. Classen Blvd. OKC, OK 73106-7223 sms/14-1046-DIS/Cond Ord</p> </div>	<p>RECEIVED OKLAHOMA INSURANCE DEPARTMENT NOV 05 2014 Legal Division</p>
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7014 0150 0001 9588 5105</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	