

**BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA**

**FILED**

FEB 14 2014

INSURANCE COMMISSIONER  
OKLAHOMA

STATE OF OKLAHOMA, ex rel. JOHN D. DOAK, )  
 Insurance Commissioner, )  
 )  
 Petitioner, )  
 vs. )  
 )  
 KIMBERLY SCHWOEGLER, a licensed bail )  
 bondsman in the State of Oklahoma, )  
 )  
 Respondent. )

Case No. 14-0126-DIS

**CONDITIONAL ADMINISTRATIVE ORDER  
AND NOTICE OF RIGHT TO BE HEARD**

COMES NOW the State of Oklahoma, ex rel. John D. Doak, Insurance Commissioner, by and through counsel, Dan R. Byrd, and alleges and states as follows:

**JURISDICTION**

1. John D. Doak is the Insurance Commissioner of the State of Oklahoma and as such is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101-7301, and the Oklahoma Bail Bond Act, 59 O. S. §§ 1301-1340.
2. Kimberly Schwoegler (“Respondent”) is a licensed bail bondsman in the State of Oklahoma holding license number 199507.

**FINDINGS OF FACT**

1. Every bail bondsman license expires biennially at 12:00 midnight on the last day of the bondsman’s birth month. 59 O.S. § 1304.
2. Every bondsman is required to renew his or her license biennially by submitting a completed renewal application by the end of his or her birth month. 59 O.S. § 1309.
3. Approximately forty-five days prior to the expiration of a bondsman’s license,

Oklahoma Insurance Department (“OID”) staff sends an E-mail to the bondsman advising of the license expiration date.

4. Respondent’s birth month is November. Accordingly, her license expired at midnight, November 30, 2013.

5. On December 16, 2013, Respondent renewed her license.

6. OID personnel conducts audits of late renewals to determine if bondsmen execute any bonds during periods they were not licensed. Investigation of bonds executed in the county and municipality in which Respondent operates revealed that, during the unlicensed period, Respondent executed sixteen (16) appearance bonds. These bonds totaled \$113,000.00.

#### **CONCLUSIONS OF LAW**

1. The allegations are found to be true and correct and Respondent has violated 59 O.S. §§ 1303(A) and 1320(A), and Oklahoma Administrative Code 365:25-5-35(E) by executing bail bonds in Oklahoma without a valid Oklahoma bail bond license.

#### **ORDER**

**IT IS THEREFORE ORDERED that Kimberly Schwoegler is hereby CENSURED and FINED \$250.00.**

Respondent is further notified that she 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 56<sup>th</sup> St., Suite 100, Oklahoma City, Oklahoma 73112, and **provide 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 become a FINAL ORDER on the 31<sup>st</sup> day following the receipt of the Order.**

WITNESS My Hand and Official Seal this 14<sup>th</sup> day of February, 2014.



JOHN D. DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

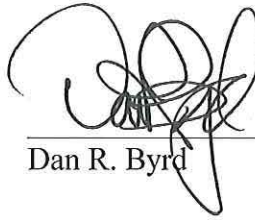
A handwritten signature in black ink, appearing to read "Dan R. Byrd", is written over a horizontal line.

Dan R. Byrd  
Assistant General Counsel  
3625 NW 56<sup>th</sup> Street, Suite 100  
Oklahoma City, Oklahoma, 73112  
Tel. (405) 522-6330  
Fax (405) 522-0125

**CERTIFICATE OF MAILING**

I, Dan R. Byrd, 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 via certified mail with return receipt requested on this 14<sup>th</sup> day of February, 2014, to:

Kimberly Schwoegler  
120 N. 2<sup>nd</sup> Ave.  
Purcell, OK 73080-4206



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Dan R. Byrd

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

7001 0320 0004 4248 5587

OFFICIAL USE

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



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Sent To  
 Street, Apt. #  
 or PO Box No  
 City, State, Z

**Kimberly Schwoegler**  
 120 N. 2nd Ave.  
 Purcell, OK 73080-4206  
 sms/14-0126-DIS/Cond Ord.

PS Form 3800, January 2001 See 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:

**Kimberly Schwoegler**  
 120 N. 2nd Ave.  
 Purcell, OK 73080-4206  
 sms/14-0126-DIS/Cond Ord.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Kimberly Mills*

B. Received by (Printed Name)  Date of Delivery  
*Kimberly Mills 2/18/14*

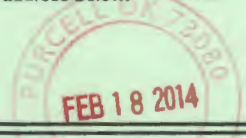
D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee)  Yes

RECEIVED  
 OKLAHOMA INSURANCE DEPARTMENT

FEB 20 2014



2. Article Number (Transfer from service label) **7001 0320 0004 4248 5587**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540