

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

4. Respondent’s birth month is June. Accordingly, her license expired at midnight, June 30, 2015.

5. On July 21, 2015, Respondent untimely 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 fourteen (14) appearance bonds. These bonds totaled \$49,400.00.

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(d) by executing bail bonds in Oklahoma without a valid Oklahoma bail bond license.

ORDER

IT IS THEREFORE ORDERED that Rhonda Abel is hereby CENSURED and FINED Two Hundred Fifty Dollars (\$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 56th 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 31st day following the receipt of the Order.

WITNESS My Hand and Official Seal this 30th day of September, 2015.



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.

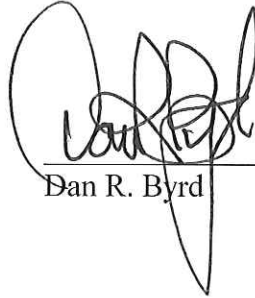
Dan R. Byrd
Assistant General Counsel
3625 NW 56th Street, Suite 100
Oklahoma City, Oklahoma, 73112
Tel. (405) 522-6330
Fax (405) 522-0125

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 30th day of September, 2015, to:

Ronda Abel
517 E. Cherokee Ave.
Nowata, OK 74048-2809

**CERTIFIED MAIL NO:
7015 0640 0004 4933 6510**



Dan R. Byrd

7015 0640 0004 4933 6510

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No., or PO Box _____

City, State, ZIP+4® _____

Ronda Abel
517 E. Cherokee Ave.
Nowata, OK 74048-2809
15-1046-DIS/DRB(mt)
(Cond. Adm. Ord. ~9-30-15)

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



JOHN D. DOAK
Insurance Commissioner
Oklahoma Insurance Department
5 Corporate Plaza
3625 N.W. 56th St., Ste. #100
Oklahoma City, OK 73112-4511



7015 0640 0004 4933 6510

neopost FIRST-CLASS MAIL
09/30/2015
US POSTAGE \$006.73⁵



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47X RECEIVED OKLAHOMA INSURANCE DEPARTMENT

OCT 08 2015

Legal Division

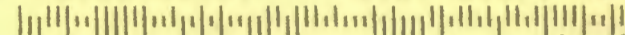
Ronda Abel
517 E. Cherokee Ave.
Nowata, OK 74048-2809

NIXIE 731 FE 1 0010/03/15

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
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BC: 73112451125 *0357-03179-30-42

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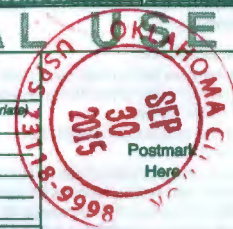
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Ronda Abel
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Nowata, OK 74048-2809
15-1046-DIS/DRB(mt)
(Cond.Adm.Ord. ~9-30-15)

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Ronda Abel
517 E. Cherokee Ave.
Nowata, OK 74048-2809
15-1046-DIS/DRB(mt)
(Cond.Adm.Ord. ~9-30-15)

9590 9403 0272 5155 1366 13

2. Article Number (Transfer from service label)
7015 0640 0004 4933 6510

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X 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

RECEIVED
OKLAHOMA INSURANCE DEPARTMENT
OCT 08 2015

3. Service type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Insured Mail Restricted Delivery (over \$500)