	JDGMENT OF CONVICTIO	N AND SENTENCING		ATION / COMMITMEN E 53CO 9 · 23DCO · C		1/0
MONROE CIRCUIT (Aller 8		в: <u>4/16/1976</u> ssn:)		
STATE OF INDIANA	,		DO		(XX-XX- <u>W-12</u>) 5
ADDRESS: 4	nhoused			PHONE:	10100010	
Defendant acknowle	edges understanding of the nature uilty to after trial is found guilty	diana appears and Defendant of the charge(s), the range of of Ct. T: The Ct	f penalties, and the rights en	numerated in I.C. 35-35-1-2,	and after waiver	of such
Class / Level	plea(s) to be intelligent, voluntary aInfraction / Misdemeanor / Felor Class A Misdemeanor be vacwith no probable cause to bel	ny). The remaining counts, if a cated and the cause dismisse	any, are dismissed, upon mod d <u>upon application</u> (after cor	otion of the State. Judgment impletion of probation without	of conviction sha	all / may
SENTENCE:	180 days with	n all but ti	me Served	Suspended		
					. 12	17/23
Sentences Concu	urrent To:			_ Actual Days Served: 3	- 16	2/29/23
Court will conside	nmends Purposeful Incarceration. Uper a modification of this sentence.				n as determined b	y IDOC, the
■ Suspension of De	er's license is suspended for cfendant's driver's license for che	from the date in the dat	test refusal is vacated [terminated effective		<i>J</i>
PROBATION TE	180 days	TO END 3/31	2024 SUPERVI	SED TERM O	ess	
The Court authoriz	zes transfer of probation supervision		ence upon compliance with a TIONS OF PROBATION		nent of fees.	
 I will report any I will maintain co I will inform my I will allow the p I will not carry, u I will not use alo I will submit to d I will meet with r 	t a new criminal offense. new criminal charge to the probation officer a probation officer where I am stay probation department to visit me in use, or possess any weapons and cohol and I will not use controlled drug/alcohol tests, at my expense my probation officer to develop and the Probation Department immedia	as directed. In at each scheduled appoint in at each scheduled appoint in at each scheduled appoint in a substances unless prescribe, when requested by the prond follow an individualized prond in at each in a	bintment. De used to harm myself or bed to me for valid medical obation department. Dolan, at my expense, that for	reasons by a properly lice	to support my si	uccess.
you shall provide a D 2.2.3(b), if you viola	DNA sample and you shall not leave te a condition of probation during of probation OR (2) 45 days after th	the State of Indiana for more to the probationary period, a part of the the State receives notice of the	than 45 consecutive days with petition to revoke probation e violation.	hout written permission of the may be filed before the ea	Court. Pursuant	t to I.C. 35-38-
MONETARY CONDITIONS:	Payable to the Clerk by Alcohol Countermeasures/Drug Interest Other Fees: \$	o Tudg Metatric Costs erdiction Fee: \$ for	: \$ 189.00 Public Det Court Alcohol/Dr	fender Fee: \$ ug Program Fee: \$) Fine: \$	
	☐ Defendant agrees the Clerk sha Payable in Probation Department	Il apply any cash bond to the p :: If on probation, probation fee	ayment of costs, fines, fees, a s will be assessed and must b	and restitution. be paid through the probation	department.	
ADDITIONAL CON	IDITIONS	SPECIAL CON	DITIONS OF PROBATION	<u>ON</u>		
ADDITIONAL CON	DITIONS:					
☐ RESTITUTION	: A separate No Contact Order ha CONDITION: I will pay restitution CORRECTIONS: I shall successful	n through the Monroe County	munity Corrections Progran	n rules and the payment of f	separately with thees, the following hours of commu	g:
SO ORDERED AND	DATED: 10-3-23	/ / /			, MONROE CIRC	•
acknowledge my unde seizure as related to arrested on a warrant	ad explained to me this sentencing of erstanding of the conditions and I explained the terms of my probation. I hereby it issued for violation of my probation, Defendant's Signat	pressly waive my Constitutional waive objection to the admiss I hereby waive extradition to the	al rights against self-incriminal sibility of laboratory test resul the State of Indiana and this C	tion and consent to warrantles	ss and suspicionle	ess search and ree that if I am
- / -	NITMENT / TO THE SHERIFF AC	W/	WI	uicss.	1111	
Report Date(s):	Time(s):	Release Date(s		Time(s):		
Pros: CP	Def:	cr:CDND	Tape: PM 301		Form 7	6/29/2023