

IN THE CIRCUIT COURT OF THE NINTH JUDICIAL CIRCUIT
IN AND FOR ORANGE / OSCEOLA COUNTY, FLORIDA

STATE OF FLORIDA,

CASE NO. _____

v.

DIVISION: _____

Defendant.

_____ /

PLEA(S) FORM

1. **PLEA:** I, _____, Defendant, withdraw my plea(s) of not guilty and enter plea(s) of:

Count _____ () Guilty () Nolo Contendre to () as charged () lesser _____

Degree _____ F.S. _____ Maximum Sentence _____ Min.Man. _____

Count _____ () Guilty () Nolo Contendre to () as charged () lesser _____

Degree _____ F.S. _____ Maximum Sentence _____ Min.Man. _____

Count _____ () Guilty () Nolo Contendre to () as charged () lesser _____

Degree _____ F.S. _____ Maximum Sentence _____ Min.Man. _____

Count _____ () Guilty () Nolo Contendre to () as charged () lesser _____

Degree _____ F.S. _____ Maximum Sentence _____ Min.Man. _____

Count _____ () Guilty () Nolo Contendre to () as charged () lesser _____

Degree _____ F.S. _____ Maximum Sentence _____ Min.Man. _____

Count _____ () Guilty () Nolo Contendre to () as charged () lesser _____

Degree _____ F.S. _____ Maximum Sentence _____ Min.Man. _____

2. **PROMISES/RECOMMENDATIONS:** No one has promised me anything to get me to enter the plea(s) except as stated herein.

A. The prosecutor and I have agreed to the following: _____

_____.

3. **PENALTIES:** I understand the total maximum penalties for the crime(s) to be _____ plus total maximum fine(s) of \$ _____ plus court costs, fees, costs, costs of investigation, and restitution. _____ **(Defendant's Initials)**

4. **TRIAL RIGHTS:** I understand that if the Court accepts my plea(s), I give up my right to: (1) a trial by jury; (2) have a jury determine whether I am guilty or not guilty; (3) see and hear the witnesses testify, and to have my attorney(s) question them for me; (4) subpoena and present witnesses and items of evidence in my defense, and to present any defense I might have to the jury; (5) testify or to remain silent; and (6) require the prosecutor to prove my guilt by admissible evidence beyond a reasonable doubt before I can be found guilty. _____ **(Defendant's Initials)**

5. **PLEA UNDERSTANDING:** I understand that a plea of Guilty admits that I committed the crime(s) and a plea of Nolo Contendere says that I do not contest the evidence against me. I understand that if the Court accepts my plea(s) there will be no trial and the Court will impose sentence(s) based upon my plea(s). _____(Defendant's Initials)

6. **CHARGES, DEFENSES, PENALTIES:** I have read the Information/Indictment in this case and I understand the charge(s) to which I enter my plea(s). I have reviewed the evidence against me. I know of no physical evidence containing DNA which could exonerate me. My attorney(s) has/have explained to me the maximum penalties for the charge(s), the essential elements of the crime(s), and possible defenses to the crime(s). I understand these things. I also understand that if I am on probation/community control/parole, my probation/community control/parole can be revoked and I can receive a separate sentence up to the maximum on the probation/community control/parole charge in addition to the sentence imposed in the present case(s). _____(Defendant's Initials)

7. **VOLUNTARINESS:** No one has pressured, forced, threatened, or coerced me to enter the plea(s). I am entering the plea(s) because: () I believe I am guilty or () I believe that it is in my best interest. I enter the plea(s) voluntarily of my own free will. _____(Defendant's Initials)

8. **DEPORTATION:** I understand that if I am not a citizen of the United States, I WILL be deported. I have also had a meaningful opportunity to consult with an attorney(s) regarding deportation. I understand that no attorney(s) nor judge can advise/guarantee that I will or will not be deported. _____(Defendant's Initials)

9. **EDUCATION:** The highest grade/education I have completed: _____. I read and write () English () _____. I () read () was read this **Plea Form** by _____. _____(Defendant's Initials)

10. **COMPETENCY:** At the present time, I am not under the influence of any drugs, alcohol, medication, or narcotics. I () am () am not presently taking any medication. I am presently taking the following medication: _____. The medication () does () does not affect my ability to concentrate or to think clearly. I am not suffering from any physical or mental problems that would affect my understanding of these proceedings. _____(Defendant's Initials)

11. **ENHANCED SENTENCE:** I understand that the State of Florida () is () is not seeking an enhanced sentence as _____ for which the Court may impose a sentence of _____. _____(Defendant's Initials)

12. **PRISON RELEASEE REOFFENDER:** I understand that I will be sentenced to the statutory maximum unless the Court can give me a greater sentence if I am entering a plea(s) of Guilty/Nolo Contendre to an offense(s) enumerated in F.S. 775.082(9)(a)1. and (1) the offense(s) was committed within three years of my release from a state correctional facility operated by the Department of Corrections or a private vendor or from a correctional institution of another state, the District of Columbia, the United States, or any foreign jurisdiction; (2) the offense(s) was committed while serving a prison sentence in one of the aforementioned facilities; or (3) the offense(s) was committed while on escape status. _____(Defendant's Initials)

13. **CRIMINAL PUNISHMENT CODE:** I understand that my sentence will be imposed pursuant to Florida Law and the Criminal Punishment Code Scoresheet (CPCS). The CPCS will be prepared and is based upon the offense(s) that I am entering plea(s) and my prior criminal record. I understand that I will not be permitted to withdraw my plea(s) if the correct CPCS at my sentencing is other than what is presumed at this time. I understand that the CPCS only suggests a minimum sentence and the Court can sentence me to any lawful sentence. I understand that if my Total Sentence Points are greater than or equal to 363, a life sentence may be imposed by the Court for any felony offense. I understand that my maximum sentence is up to the statutory maximum unless the Lowest Permissible Prison Sentence in Months exceeds the statutory maximum. No one has promised me that the Court will depart from the CPCS. _____(Defendant's Initials)

14. **TIME SERVED:** I agree the correct amount of time served that I am entitled to is _____ days. _____(Defendant's Initials)

15. **EARLY RELEASE:** I understand that I may serve every day of my sentence. No one has promised that I will be released prior to the expiration of my sentence nor that I will receive any good and gain time. _____(Defendant's Initials)

16. **ATTORNEY FEES:** I do ()not waive ()waive my right to a hearing, and I agree that \$_____ is a reasonable sum to pay for the services of my court appointed attorney(s). _____**(Defendant's Initials)**

17. **CIVIL COMMITMENT:** I understand that if I am entering a plea(s) of Guilty/Nolo Contendre to a sexually motivated offense or if I have been previously convicted of a sexually motivated offense, this plea(s) may subject me to involuntary civil commitment as a sexually violent predator upon completion of my sentence. _____**(Defendant's Initials)**

18. **DRIVER'S LICENSE:** I understand that if I am entering a plea(s) of Guilty/Nolo Contendre to an offense for which automatic, mandatory, or discretionary driver's license/privilege suspension or revocation is required or discretionary by law to be imposed by the Court or by a separate agency, this plea(s) will provide the basis for the suspension or revocation of my driver's license/privilege. I understand that if I am entering a plea(s) of Guilty/Nolo Contendre to a traffic offense I may be declared a Habitual Traffic Offender. _____**(Defendant's Initials)**

19. **SUPERVISION TOLLING AND COSTS:** I understand that while I am incarcerated my probation/community control/parole is tolled unless ordered otherwise by the Court. I understand that if I am placed on probation/community control/parole I will be required to pay costs of supervision. _____**(Defendant's Initials)**

20. **FIRST STEPS PROGRAM:** I understand that a \$1 monthly fee is assessed while on probation and will go to the First Step Program for the Ninth Judicial Circuit. Probation cannot be violated for failure to pay the \$1 per month. _____**(Defendant's Initials)**

21. **DNA:** I understand that the Court will order me to submit to a DNA sample. _____**(Defendant's Initials)**

22. **SENTENCING DATE:** I understand that if the Court permits me to remain at liberty pending my Sentencing I will comply with the following conditions: (1) show up on time on the date that Sentencing is set; (2) not violate any conditions of my release; (3) not violate any law; (4) all requests of the Department of Corrections to complete a Pre-Sentence Investigation report (if required); and (5) notify immediately any change in my address or telephone number to the Clerk of Court, bonds person, and my attorney(s). I understand that if I violate any of the aforementioned conditions I will not be allowed to set aside my plea(s) and the Court may sentence me to the total maximum penalties indicated in Paragraph 3. _____**(Defendant's Initials)**

23. **COLLECTIONS COURT:** I understand that if my financial obligations are referred to the Collections Court Program for collection that any failure to comply with the Collection Court Program requirements will result in the suspension of my driving privilege, a writ of bodily attachment being issued, and my case being sent to a Collection Agency to collect the Court Fines and Costs. _____**(Defendant's Initials)**

24. **HEARING PRESENCE:** I () waive () do not waive my right to be present at any Restitution/Attorney(s) Fee/Cost Hearing. _____**(Defendant's Initials)**

25. **SEAL/EXPUNGEMENT:** No one has promised me that this case(s) will be sealed or expunged. _____**(Defendant's Initials)**

26. **APPEAL:** I understand that I have thirty (30) days to file an appeal of in writing of the Court's Judgment and Sentence to the Clerk of Court. I understand that if I cannot afford an attorney one will be appointed to represent me. My attorney(s) has/have explained to me what an appeal is. By entering this plea, I understand that I give up my right to appeal all matters except (1) the legality of my sentence; (2) this Court's authority to hear this case; and (3) any pre-trial ruling for which I have reserved the right to appeal, and for which this Court has made a finding that controls an issue in this case. _____**(Defendant's Initials)**

27. **DEFENDANT'S CERTIFICATION:** I have read every word in this Plea(s) form, have discussed the contents with my attorney(s), and fully understand it. I am fully satisfied with the way my attorney(s) has/have handled this case for me. My attorney(s) has/have done everything I have asked him/her to do. _____**(Defendant's Initials)**

_____, Defendant

CASE NO. _____

SWORN TO, SIGNED, AND FILED IN OPEN COURT in the presence of defense counsel and the Judge this _____ day of _____, 20_____.

Orange / Osceola
Clerk of the Circuit Court
and County Court

Defendant's Signature

By: _____
Deputy Clerk in Attendance

CERTIFICATE OF DEFENDANT'S ATTORNEY(S) AND PROSECUTOR

I/We, Defendant's Counsel of Record, certify that: I/we have discussed this case with defendant, including the nature of the charges, essential elements of each, the evidence against him/her of which I am aware, the possible defense he/she has, the maximum penalty for the charge(s) and the right to appeal. No promises have been made other than as set forth in this plea or on the record. I believe the defendant fully understands this written plea, the consequences of entering it, and that the plea is entered of the defendant's own free will.

I, the Prosecutor, consent to the plea(s) to lesser charges, if applicable, and confirm the representations in Paragraph 2.

Defendant's Attorney(s)
Florida Bar No. _____

Prosecutor
Florida Bar No. _____

DNA INQUIRY ADDENDUM TO PLEA OF GUILTY OR NOLO CONTENDRE

DEFENSE COUNSEL

_____ I have reviewed the discovery disclosed by the State, including a listing or description of physical items of evidence.

_____ I have reviewed with my client the nature of the evidence disclosed through discovery.

_____ I am personally unaware of any physical evidence for which DNA testing may exonerate my client.

Defendant's Attorney(s)
Florida Bar No. _____

Date

DEFENDANT

_____ I have discussed the discovery and information with my attorney and agree to the representations made by my attorney.

Defendant

Date

PROSECUTOR

_____ I am personally unaware of any physical evidence for which DNA testing may exonerate the defendant.

Prosecutor
Florida Bar No. _____

Date