

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE
SENTENCING MEMORANDUM**

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People v.

THE FOLLOWING CHECKED TERMS AND
CONDITIONS ARE ORDERED BY THE COURT

Case Number _____

MISDEMEANOR FELONY

<input type="checkbox"/> PAS <input type="checkbox"/> FPG <input type="checkbox"/> SPG <input checked="" type="checkbox"/> T1	Proceedings are suspended. Formal probation granted for _____ months. Summary probation granted for _____ months. Obey all laws, ordinances, and court orders.	Charges admitted: Priors admitted: Enhancements: <input type="checkbox"/> 654 Counts _____ stayed pursuant to PC 654.
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CUSTODY / WORK PROGRAMS / COMMUNITY SERVICE

<input type="checkbox"/> TAA <input type="checkbox"/> TAJ1 <input type="checkbox"/> THA <input type="checkbox"/> TAD	Be committed to the custody of RSO for _____ days. Custody to be served as follows: _____ days to be served in the Work Release Program. Report on or before _____. Perform _____ hours of community service through Alternative Sentencing and report to program within 14 days, excluding time in custody. File proof of completion by _____. Committed to custody of RSO for one day for booking purposes only. Report to _____ by _____.	<input type="checkbox"/> CTS <input type="checkbox"/> CTSVF <input type="checkbox"/> CJS <input type="checkbox"/> CJSCS <input type="checkbox"/> CJSC <input type="checkbox"/> CJSL <input type="checkbox"/> CJSS <input type="checkbox"/> TXY5R	Credit time served _____ days actual + _____ days PC § 4019 Credit time served _____ days actual + _____ days PC § 2933.1 _____ days county jail ordered suspended. County jail sentence consecutive to _____. County jail sentence concurrent with _____. County jail time to be served in _____ in lieu of County jail. County jail sentence stay granted; defendant ordered to surrender _____ at _____ in Dept. _____. Report immediately to the Riverside Sheriff's Live Scan office for fingerprinting. (Riverside)
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FINES / FEES / RESTITUTION: All fines, fees, and restitution imposed shall be paid to the Court, as directed by the Enhanced Collections Division.

<input type="checkbox"/> TBL(TBLC) <input type="checkbox"/> TBHL1/2 <input type="checkbox"/> TMC1 <input type="checkbox"/> TXV1 <input type="checkbox"/> TXT4 <input type="checkbox"/> TYC <input type="checkbox"/> TYF/1 <input type="checkbox"/> TYF3 <input type="checkbox"/> TYG/A <input type="checkbox"/> TBAL <input type="checkbox"/> TBOL <input type="checkbox"/> TBBL	Pay fine and penalty assessment of \$_____. Pay fine of \$_____ or serve time in jail, at rate of \$_____ per day <input type="checkbox"/> concurrent <input type="checkbox"/> consecutive. Pay fee of \$500 to domestic violence fund (PC § 1203.097(a)(5)) Pay booking fees of \$_____ (GC §29550). Complete and return a Financial Disclosure form to the court on or before _____, or within 5 days of release. Pay restitution fine of \$_____ PC §1202.4(b.) Pay probation revocation restitution fine of \$_____ (PC §1202.44). Stayed pending completion of Probation. The stay of your obligation to pay the probation revocation restitution fine of \$_____ is dissolved. (PC §1202.44). Payment is due immediately. If your fine(s) or actual restitution is not paid in full more than 120 days before completion of probation you are ordered to re-contact Enhanced Collection and complete a new Financial Disclosure Statement form (PC §1202.4(f)(11)) Pay drug lab fee and penalty assessment of \$190 (H&S § 11372.5). Pay additional drug lab fee - total \$_____ (H&S § 11372.5). (\$50 each additional conviction) Pay drug education fee and penalty assessment of \$_____ (H&S § 11372.7).	<input type="checkbox"/> TBQL <input type="checkbox"/> TBKL <input type="checkbox"/> TCB/Z <input type="checkbox"/> TCE <input type="checkbox"/> TCH <input type="checkbox"/> TCQ <input type="checkbox"/> TCS <input type="checkbox"/> TEE <input type="checkbox"/> DORECD <input type="checkbox"/> DORECA <input type="checkbox"/> TXJ1/A	Pay additional drug education fee - total \$_____ (H&S § 11372.7) (\$50 each additional conviction). Pay an alcohol and drug assessment fee of \$100 (VC § 23649). Pay victim restitution; amount to be determined by the Probation Department; disputes as to the amount to be resolved at a court hearing (PC § 1203.1(a)(3)). Pay victim restitution of \$_____ (PC § 1203.1(a)(3)). Pay restitution of \$_____ to DPSS and report to DPSS Recovery Unit within 5 days of sentencing. Pay interest on restitution of 10% per annum from _____ (PC § 1202.4(f)(3)(G)). Pay administrative fee equal to 15% of victim restitution (PC § 1203.1(l)). Pay the actual cost of court ordered drug testing through the court as directed by Enhanced Collections. Report to/cooperate with Enhanced Collections immediately or within two business days of release from custody. Report to Enhanced Collections immediately, or within two business days after release, regarding ability to pay attorney fees; total hours _____. Submit to HIV/AIDS testing by RSO (in-custody)/County Health Department within 5 days of this order (PC §1202.1).
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ALCOHOL / DUI / DRIVING LICENSE

<input type="checkbox"/> TDA <input type="checkbox"/> TDE <input type="checkbox"/> TDF <input type="checkbox"/> TDH <input type="checkbox"/> TDM1/A <input type="checkbox"/> TDM2 <input type="checkbox"/> TDM12	Do not consume alcoholic beverages; do not frequent places where they are main item of sale. Do not drive with any measurable amount of alcohol or drugs in your blood, or within 6 hours of consuming alcohol or any drugs. If arrested for driving under the influence of intoxicants, submit to blood, breath, or urine test as requested by the arresting officer. Do not drive without valid license, insurance, & registration. Install an ignition interlock device in each vehicle you own or operate by _____ and maintain for a period of _____ months from the date of reinstatement of your driving privilege. File proof of installation of IID by _____. IID installation is stayed as long as you do not own or operate any vehicle.	<input type="checkbox"/> TDG1 <input type="checkbox"/> TDG3 <input type="checkbox"/> TDG2 <input type="checkbox"/> TDG4 <input type="checkbox"/> TDG7 <input type="checkbox"/> TDG8 <input type="checkbox"/> TDN4/A <input type="checkbox"/> TDN4B <input type="checkbox"/> THV <input type="checkbox"/> PPIID	Contact or phone by _____ Complete by _____ AB541- 1 st Offender Impaired Driver Program. AB1353 - 1 st Offender Impaired Driver Program (enhanced) SB38 - 18 month Offender Impaired Driver Program SB1176 - Alcohol and drug education class Enroll in the Hamm Program by _____. Enroll in the TEMPO Program by _____. Enroll by _____ and successfully complete, at your expense, the Alcohol Monitoring Program through Sentinel Offender Services (SOS). Pay the alcohol monitoring and installation fees in an amount and manner as determined by Sentinel Offender Services (SOS), and as directed by the probation officer. Enroll in boating safety classes by _____ and complete by _____. Provide proof of installation of IID by returning the verification form to the court by _____ or appear at _____ in Dept. _____ on that date.
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DRUG / SEARCH / TEST PROGRAM TERMS

<input type="checkbox"/> TDL1 <input type="checkbox"/> TEC <input type="checkbox"/> TEA1/A <input type="checkbox"/> TEA1B	Do not knowingly use or possess any controlled substances, unless lawfully prescribed for you. Submit to chemical test of your blood, saliva, breath, or urine or any reasonable physical test upon request of any law enforcement or probation officer. Submit to immediate search of person/property including all residences/premises/ storage units, containers & vehicles under your control; by probation officer or law enforcement officer; with or without cause; Search for the detection of _____.	<input type="checkbox"/> TEF2 <input type="checkbox"/> THK1 <input type="checkbox"/> THK2 <input type="checkbox"/> THK3 <input type="checkbox"/> THK4 <input type="checkbox"/> TDB	Provide a DNA sample as directed by probation or law enforcement personnel (PC § 296(a)). Register with local law enforcement within 5 days from today or within 5 days upon release from custody: PC § 290 H&S § 11590 PC § 457.1 PC § 186.30 Attend _____ AA meetings or approved alternative program. Provide proof of completion to probation/court by _____.
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DRUG / SEARCH / TEST PROGRAM TERMS (Continued)

<input type="checkbox"/> THP Enroll in AIDS education program by _____ and complete by _____.	<input type="checkbox"/> TDB3 Attend _____ NA meetings or approved alternative program. Provide proof of completion to probation/court by _____.
<input type="checkbox"/> TMJ Report to the Alternative Sentencing within 14 days (excluding time in custody) and:	<input type="checkbox"/> THG/A Reside at _____, cooperate with staff, and do not leave without permission.
<input type="checkbox"/> TMF Enroll in parenting classes as directed/thru the Court / Probation/ Alternative Sentencing/DPSS by _____. Complete by _____. *	<input type="checkbox"/> THF/A Participate and complete at your expense any counseling, rehabilitation treatment, program deemed appropriate by probation officer; and authorize release of information relative to progress.
<input type="checkbox"/> TMB Enroll in a Probation approved 52-week Domestic Violence Program (PC 1203.097); provide proof of enrollment to the court/probation on/before _____. Complete by _____. *	<input type="checkbox"/> TMA Enroll in Anger Management Program by _____ and complete by _____. *
	<input type="checkbox"/> TME1 Enroll in probation approved 1 year minimum Child Abuse Treatment Prog. Provide proof within 30 days of order/release.

*Pay all program fees and submit proof of payment and program completion as directed by the Probation Officer.

ASSOCIATION / RESIDENCE / WORK TERMS

<input type="checkbox"/> THO Do not associate with any unrelated person you know to be on probation/parole/mandatory supervision, or PRCS.	<input type="checkbox"/> THC Inform the probation officer of your place of residence; reside at residence approved by the probation officer;
<input type="checkbox"/> THO1 Do not associate with any unrelated person you know to be either on probation/parole/mand. supervision/PRCS, or a gang member.	<input type="checkbox"/> THC1 Give written notice to the probation officer 24 hours before changing your residence; do not move without the approval of the probation officer.
<input type="checkbox"/> TDK/ TDKA Do not associate with any unrelated person you know to be a possessor/user /trafficker of controlled substances/ on probation/parole/mand. supervision/PRCS	<input type="checkbox"/> THB Seek and maintain employment or attend a full time school or vocational program.
<input checked="" type="checkbox"/> THR Do not leave the State of California without first obtaining written permission of the Probation Department per the Interstate Compact Act.	<input type="checkbox"/> THD Have no direct or indirect contact with _____. <input type="checkbox"/> TFK Do not annoy, harass, threaten, or disturb the peace of _____.

TAGGER TERMS

<input type="checkbox"/> TLR Do not engage in tagging, marking, painting, scribing or defacing public and/or private property.	<input type="checkbox"/> TLU / TLUA / TLUB Submit to immediate search/seizure of person/ property including all residences/premises/storage units/containers/vehicles by probation/law enforcement officer with/without reasonable cause; for detection of tagging and/or scribing items such as spray paint/markers/scribers/aerosol nozzles or other items commonly used for tagging.
<input type="checkbox"/> TLS Do not knowingly use or possess spray paint, markers, scribes, aerosol nozzles, or other items that you know are commonly used for tagging.	
<input type="checkbox"/> TLT Do not associate with any person you know to engage in tagging or similar activities.	

ADDITIONAL PROBATION TERMS

<input type="checkbox"/> THJ1/A Do not knowingly own/possess/have under your control / immediate access to any firearm/deadly weapon, ammunition, or weapon related paraphernalia/incendiary device. Stay _____ yards away from _____, and don't enter premises described as _____.	<input type="checkbox"/> TMI Any valid Domestic Violence protection/restraining order existing during the period of probation is incorporated into probation terms. Report to probation officer immediately or upon release from custody, and abide by all reasonable directives of probation officer.
<input type="checkbox"/> TFO Report any law enforcement contacts to probation officer within 48 hours.	<input type="checkbox"/> THL If expelled, deported, or voluntarily leave the United States, you must report to probation by telephone or in writing within 30 days of departure.
<input type="checkbox"/> THI If expelled or deported, do not re-enter the United States illegally.	
<input type="checkbox"/> THM1 Other: _____	

ADDITIONAL STAND-ALONE ORDERS OF THE COURT, NOT IMPOSED AS TERMS AND CONDITIONS OF PROBATION

<input checked="" type="checkbox"/> TXX Pay court operations assessment fee of \$40 per convicted charge (PC § 1465.8).	<input type="checkbox"/> TXM/A Pay the costs of probation supervision in an amount to be determined by Probation. Based on the level of supervision, the monthly costs will range from \$_____ to \$_____ (PC § 1203.1b).
<input checked="" type="checkbox"/> TXW Pay court conviction assessment fee of \$30 per convicted misdemeanor/felony charge (GC § 70373).	<input type="checkbox"/> CFAF Court finds defendant has the ability to reimburse the county for attorney fees at the standard rate of \$119.50 per hour. Attorney fees ordered in the amount of \$_____.
<input type="checkbox"/> TXW1 Pay court conviction assessment fee of \$35 per convicted infraction charge (GC § 70373).	<input type="checkbox"/> TXA2 Weapons ordered destroyed (PC § 18005(c).)
<input type="checkbox"/> TXV2 Pay citation fees of \$10 (GC § 29550).	<input type="checkbox"/> TXV5 Pay Pre-sentence Incarceration costs of \$_____. (Incarcerated for ____ days). (PC 1203.1c).
<input type="checkbox"/> TXV3 Pay O.R. fees of \$25 (GC § 29550).	<input type="checkbox"/> PHS Defendant is ordered to return to court on _____ at _____ in Dept. _____ for _____.
<input type="checkbox"/> TXL Pay cost of pre-sentence report in amount to be determined by Probation, not to exceed \$ _____ (PC § 1203.1b).	<input type="checkbox"/> THY Return to court on _____ at _____ in Dept. _____ for a progress hearing to evaluate your compliance with the above terms and conditions.
<input type="checkbox"/> FNPAF Any fine/fee not paid in full by _____ will be subject to a \$50 administrative fee (PC § 1205(d)).	<input type="checkbox"/> POF Payment of fines due by _____ or appear at 7:30 am on that date.
<input type="checkbox"/> DMVNIR DMV shall not issue a restricted drivers license. Your license:	
<input type="checkbox"/> TXD3 Is suspended for _____ months. Surrender license to the court.	
<input type="checkbox"/> TXG1 Shall be revoked by DMV (VC § 13202(b)) for _____ mos.	
<input type="checkbox"/> TXG4/A Shall be revoked by DMV for _____ months and until you complete the SB38 Impaired Driver program, if ordered.	

I have read, I understand, and I accept these terms and conditions of probation, and **additional non-probationary orders** on pages one and two.

Defendant: _____ Defense Attorney: _____

District Attorney: _____ Interpreter: _____

Dated: _____ IT IS SO ORDERED: _____ JUDICIAL OFFICER

NOTICE TO DEFENDANT: If you have been placed on probation, you have the right to ask the court either (1) to allow you to withdraw your plea of guilty or of nolo contendere and to enter a plea of not guilty, or (2), if you were convicted after a plea of not guilty, to set aside the verdict of guilty. (For details, see Penal Code section 1203.4.) If you have been convicted of a misdemeanor and not placed on probation, and one year has passed since pronouncement of judgment, you have the right to make a similar request. (For details, see Penal Code section 1203.4a.) Forms on which to make such requests are available in the clerk's office.