

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF MARION

STATE OF OREGON,

)  
) Plaintiff,

) Case Number: \_\_\_\_\_

v.

) PETITION TO ENTER PLEA

)  
)  
)  
)  
) Defendant.

1. I wish to plead  GUILTY  NO CONTEST as follows:

Count \_\_\_\_\_ : \_\_\_\_\_ CS \_\_\_\_\_ / CH \_\_\_\_\_ Presumptive \_\_\_\_\_ mos prob/DOC

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Count \_\_\_\_\_ : \_\_\_\_\_ CS \_\_\_\_\_ / CH \_\_\_\_\_ Presumptive \_\_\_\_\_ mos prob/DOC

I further understand that the mandatory sentence is as follows:

Count \_\_\_\_\_ : \_\_\_\_\_ Count \_\_\_\_\_ : \_\_\_\_\_

Count \_\_\_\_\_ : \_\_\_\_\_ Count \_\_\_\_\_ : \_\_\_\_\_

2. I understand that by entering my plea(s), I am: (a) giving up my right to a speedy and public trial by jury which would decide whether or not the evidence proves beyond a reasonable doubt that I am guilty and whether there are facts to support a departure sentence; (b) giving up my right to confront and cross-examine witnesses the State may call to testify against me; (c) giving up my right to compel witnesses to come to court and to bring with them any physical evidence in their possession; (d) giving up my right to take the witness stand if I choose to, which includes the right to prevent anyone from calling me as witness against my wishes; and (e) giving up my right to remain silent.

3. I understand that I have the right to the help of an attorney at all stages of my case. If I cannot afford an attorney and I am indigent, an attorney will be appointed to represent me at public expense. I also understand that I may be ordered to reimburse the State of Oregon for the cost of my court-appointed counsel.

4. I understand that by entering this plea, the court may impose the same punishment as if I pled Not Guilty, there had been a trial and I have been convicted. I understand that if I enter pleas to more than one charge, the Court may run the sentence on each charge consecutive to one another.

5. I have read the Information or Indictment filed against me and understand the charges. I further understand that the maximum possible sentence I could receive is as follows:

Count(s) \_\_\_\_\_ : \_\_\_\_\_ months/years in jail or prison, and a fine of up to \$ \_\_\_\_\_, or both.

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I further understand:

My driving privileges will be suspended/revoked for \_\_\_\_\_  year(s)  month(s)  lifetime.

I will be disqualified from holding a CDL for \_\_\_\_\_  year(s)  month(s)  lifetime.

My sentence for DUII will include AT LEAST 48 hours in jail or 80 hours community service; a minimum fine of \$1000 (\$2000 if BAC is .15 or more) and a \$227 conviction fee; and AT LEAST a one year suspension of my driving privileges.

I will be ordered to pay a Chapter 163 Unitary Assessment of \$500.00

I will be ordered to pay a mandatory assessment of \$500 for each conviction of Delivery of Methamphetamine and/or mandatory assessment of \$1000 for each conviction of Manufacture of Methamphetamine.

6. I understand that if I am currently on probation, parole or post-prison supervision, this conviction may result in revocation of my probation or violation of my parole or post-prison supervision.

7. I understand that no recommendation, prediction or agreement regarding my sentence by or between attorneys is binding on the court. No threats have been made to me by anyone to convince me to enter this plea and no promises have been made except as may have been stated in open court or in this plea petition. I understand that the District Attorney will recommend the following sentence \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I stipulate to the above sentence recommendation, and I ask the Court to impose that sentence.

In exchange for my pleas to the charge(s) listed above the District Attorney is agreeing to move to dismiss:

Count \_\_\_\_\_ : \_\_\_\_\_ Count \_\_\_\_\_ : \_\_\_\_\_  
 Count \_\_\_\_\_ : \_\_\_\_\_ Count \_\_\_\_\_ : \_\_\_\_\_

I understand that if my agreement with the District Attorney requires any dismissed charges to be reinstated by the Court if my plea is withdrawn or the judgment of conviction is later reversed, vacated, or set aside; I do specifically give up any challenge I may have to the reinstatement of these charges based upon any statute of limitations and any statutory or constitutional speedy trial or double jeopardy rights applicable to the dismissed charges.

8. The factual basis for my guilt is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. I understand that if my conviction is for a felony crime, I cannot possess or own a FIREARM. I further understand that if I am convicted of a crime involving "DOMESTIC VIOLENCE," federal law may prohibit me from possessing, receiving, shipping or transporting any firearm or ammunition. I also understand that the conviction may prevent me from serving in the United States Armed Forces or being employed in law enforcement.

10. I understand that if I am not a citizen of the United States or if I am in this country without permission, conviction of a crime will result in my DEPORTATION from, or exclusion from admission to, the United States. I also understand that I may be denied United States citizenship as a result of my conviction.

11. I understand that by entering my plea(s), I am giving up all right of APPEAL to a higher court unless I can show that the sentence imposed exceeds the maximum allowed by law or is unconstitutional. I further understand that a notice of appeal must be filed within 30 days after my sentencing, and the notice of appeal must be sent to the District Attorney, the Trial Court Transcript Coordinator and the Trial Court Administrator. If I apply for an attorney and I am indigent, an attorney may be appointed to represent me on appeal. I will tell my attorney if I want to appeal and my attorney will notify the State Public Defender's office.

\_\_\_\_\_

Defendant Signature	Print Name	Date
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\_\_\_\_\_

Address	City	State	Zip
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As the attorney for the Defendant, I represent to the best of my information and belief that the Defendant has been fully informed of the material facts and law regarding this case and the plea is voluntary.

\_\_\_\_\_

Attorney Signature	Print Name	Date
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Interpreted by: \_\_\_\_\_

Signature	Print Name	Date
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\_\_\_\_\_

Circuit Court Judge	Print, Type or Stamp Name	Date
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