

CAUSE No. _____

STATE OF TEXAS

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COUNTY COURT AT LAW

V.

OF

SAN PATRICIO COUNTY, TEXAS

CERTIFICATE OF DISCOVERY AND WAIVER OF DISCOVERY UNDER ARTICLE 39.14

COMES NOW THE DEFENDANT in the above-captioned cause and hereby acknowledges the production of discovery in this matter being the documents, reports, and information listed in the attached _____ pages(s) were produced by the San Patricio County Attorney’s Office and received by the attorney for the defendant. The defendant hereby waives any additional production, disclosure, duplication, and documentation of evidence in the possession of the State under Article 39.14, Texas Code of Criminal Procedure.

The defendant desires to enter a plea of guilty at the earliest available opportunity. The defendant is aware of their statutory right to discovery and production of all evidence in the possession of the State, and knowingly and voluntarily gives up and waives that right. Because the defendant will stipulate their guilt of this offense, no further production and discovery of evidence in the possession of the State is necessary, and the defendant is satisfied with the discovery previously provided by the State.

The defendant therefore withdraws any prior request for discovery under Article 39.14(a) and waives the production, duplication, description, and itemization of any other information, document, or item which may be in the possession of or under the control of the State or any person under contract with the State *other than* any exculpatory, impeachment, or mitigating information, document, or item that would tend to negate the defendant’s guilt or reduce the punishment for the offense charged. The defendant further waives the recording and documentation of provided information under Article 39.14(i) and the formal acknowledgment of the disclosure, receipt, and listing of documents, items, and information provided to the defendant under Article 39.14(j).

SIGNED on this the _____ day of _____, 20_____.

x _____

DEFENSE COUNSEL: _____

x _____

DEFENDANT’S SIGNATURE

x _____

COUNTY ATTORNEY

STATE OF TEXAS

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COUNTY COURT AT LAW

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SAN PATRICIO COUNTY, TEXAS

WAIVERS, STIPULATIONS, APPLICATIONS AND AGREEMENTS

Defendant, named in the above numbered and styled cause, enters his plea and submits this document based upon the recommendation of punishment by the State and relying on the representation that if the court does not accept said recommendation and wishes to exceed the binding recommendations of the state, the Defendant may withdraw his plea and enter a plea of "Not Guilty."

1. AGREED PUNISHMENT RECOMMENDATION. The State and Defendant hereby present to the Court that it is mutually agreed that in return for a Plea of **GUILTY / NOLO CONTENDERE** to the charge of _____ by the Defendant, the State recommends punishment of:

Days confinement in jail _____, suspended, _____ days Community Supervision, Fine of \$ _____, probated \$ _____, and Court Cost. Restitution \$ _____ and _____ hrs. jail as condition of community supervision.

2. WAIVER OF COUNSEL & JURY TRIAL. I, the undersigned Defendant in this case, in open Court, tell the Court that I have no lawyer and, having been told that if I am too poor to employ one, a lawyer will be appointed to represent me. I do not want a lawyer and do not want a lawyer appointed to represent me. I understand by representing myself, I may be waiving possible defects in the State's pleading and that there may be defenses to the charges of which I am unaware and these defenses will be waived. I also understand the many disadvantages of proceeding without an attorney but I do not want a lawyer. I want an immediate trial before this Court without a jury, and desire to enter this plea. I do not want a jury to determine my guilt or innocence or to decide my punishment if found guilty. I want to have the Judge decide all matters. The Judge told me that I am entitled to a waiting period after I am arraigned before I am tried and I desire to give up this waiting period. The Judge told me that I have the right to have any witnesses I want to testify in this case summoned and ordered to come and testify, but I do not want and I give up this right. The Judge told me that I am entitled to confront the witnesses against me and to require they testify under oath at my trial and in my presence and hearing, and that I have the right to cross-examine the witnesses against me in person or by and through an attorney. I give up this right and agree that the prosecutor may tell the Judge of the facts of this case by telling him what the witnesses would say personally present in court. I do not want the Court Reporter to make a record of this hearing and give up my right to have one made. I ask the Court to immediately decide this case and I waive every provision of the law which would delay or arrest judgment of conviction or the Court sentencing me in this case. I have been told by the Judge that I have a right to a pre-sentence report but I request that it not be made.

3. PLEA TO CHARGE. I waive formal arraignment and plead **GUILTY / NOLO CONTENDERE** to this charge. I have never been treated for any kind of mental illness and I am sane now and was sane at the time of the commission of this offense, no one has promised me anything or threatened me in order to cause me to enter my plea in this case. I understand that the Court

does not have to follow this recommendation concerning my punishment. I expect the Court to ask about any plea bargaining agreement between me and the State and to tell me if it will follow this agreement before any findings on my plea; and should the agreement be rejected; I shall be allowed to change my plea to "Not Guilty." **I went through the ____ grade in school** and can read, write, and understand the English language. I understand that if I could be assessed punishment of a fine of up to \$4,000.00/\$2,000.00 or confinement in the San Patricio County jail for up to 365/180 days; or both for this offense.

4. APPLICATION FOR COMMUNITY SUPERVISION. I, Defendant, say under oath that:____ I have never before been convicted of or placed on probation for any felony or misdemeanor (OR) __ I have been convicted or placed on community supervision or both in the following cases:

(LIST ALL CONVICTIONS REGARDLESS OF AGE) (OR) __ See attached criminal history exhibit:

a. OFFENSE: _____ **DATE:** _____ **PLACE:** _____

b. OFFENSE: _____ **DATE:** _____ **PLACE:** _____

c. OFFENSE: _____ **DATE:** _____ **PLACE:** _____

I ask the Court to grant me community supervision and place me on same subject to terms and conditions set by the Judge. I swear that the information in this Application for Community Supervision is true and correct and I understand that any untrue statement is grounds for denial of this application, revocation of any community supervision granted based on this application, and could cause charges filed against me for perjury.

5. STIPULATION OF EVIDENCE. In writing and in open court, I expressly waive the appearance, confrontation and cross-examination of witnesses. I further consent to the introduction of testimony by affidavits, written statements of witnesses and all other documentary evidence, as attached hereto. I give up my Federal and State constitutional right against self-incrimination and after having been sworn, upon oath, I agree and stipulate that these facts constitute the evidence in this case. (All facts and allegations are contained in the attached exhibits).

6. ACKNOWLEDGMENTS. I have read and understand this document or I have had it explained to me by my attorney. I ACKNOWLEDGE all statements in this document. I SWEAR, with knowledge of the penalty for perjury, that all the statements in this document attributed to me are correct. I WAIVE all rights as stated in this document, having been informed of those rights and understanding them.

7. WAIVER OF APPEAL. I understand that, whether I plead guilty (or nolo contendere) with or without a plea bargain agreement, I may have limited right to appeal. I hereby waive any right of appeal that I may have to the judgment of the Court.

8. IF YOU ARE IN THIS COUNTRY ILLEGALLY A CONVICTION IN THIS CASE MAY RESULT IN DEPORTATION.

SIGNED and ACKNOWLEDGED under oath on _____, 20____.

X _____
Defendant

SIGNED and **ACKNOWLEDGED under oath** before me by said Defendant on the above date.

X _____
Deputy Clerk of San Patricio County

AGREED: _____ **(State's Attorney)**

AGREED: _____ **(Defendant's Attorney)**

ORDER OF APPROVAL. On this day, the preceding waivers were presented to the Court and the Court considered the age, experience, education, occupation, and previous court experience of the defendant in open court. The Court finds the waivers were knowingly and voluntarily executed and are hereby approved and granted. The Court considered the preceding plea of the defendant; it appears, and the Court so finds, that the defendant is sane and is uninfluenced by any consideration of fear, or by any persuasion, or delusive hope of pardon prompting him to confess his guilt; and, having duly admonished the defendant of the consequences of the plea and the defendant having persisted in pleading guilty, the Court accepts the defendant's plea of guilty and orders that such plea shall be entered upon the minutes of the Court.

Signed and entered this the _____, 20____.

Judge Presiding, San Patricio County Court at Law

Defendant's Right Thumbprint



STATE OF TEXAS

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V.

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OF

SAN PATRICIO COUNTY, TEXAS

JUDGMENT OF COMMUNITY SUPERVISION

On this day, Defendant, _____ who is charged with the offense of _____, committed on or about _____, as alleged in the Information filed in this cause, appeared in person and by counsel. The parties announced "ready for trial." Defendant waived arraignment and formal reading of the Information and in open Court pleaded **GUILTY / NOLO CONTENDRE**. The Court heard said plea and considered the evidence and argument of counsel and finds the defendant is **GUILTY** as charged in the Information and assesses punishment as follows:

It is **ORDERED AND ADJUDGED** by the Court that Defendant is **GUILTY** of the offense charged in the Information filed herein and the defendant shall be punished by confinement in the San Patricio County jail for a period of _____ days and shall pay a fine in the amount of \$_____, probated \$_____, Court costs \$_____ and, if applicable, attorney's fees in the amount of \$_____, hereby **ORDERED** to be paid ___Instanter, or ___ through the San Patricio County Collections Department. Defendant asked the Court to consider an **Application for Community Supervision** and it appears that the best interest of the public as well as that of defendant will be served by same. Therefore, it is **ORDERED** that the imposition of the jail sentence adjudged herein is hereby **SUSPENDED** and Defendant is **RELEASED** on his own recognizance under supervision of the Court for a period of _____ days subject to the following terms and conditions of community supervision, said period of community supervision to begin on the date this order is signed. **THE COURT ORDERS YOU, THE DEFENDANT, TO COMPLY WITH THE FOLLOWING CONDITIONS OF COMMUNITY SUPERVISION.**

Signed and So Ordered _____, 20____.

Judge Presiding, San Patricio County Court at Law

"I RECEIVED A COPY OF THIS JUDGMENT AND SENTENCE."

Defendant: x _____

Address: _____

Telephone: _____

x _____
Attorney for Defendant

Defendant's Right Thumbprint

x _____
Attorney for the State



STATE OF TEXAS

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COUNTY COURT AT LAW

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SAN PATRICIO COUNTY, TEXAS

MISDEMEANOR STANDARD CONDITIONS OF PROBATION

The defendant in the above entitled and numbered cause having been granted community supervision under Article 42A of the Texas Code of Criminal Procedure, is hereby ordered to abide by the rules and regulations of the San Patricio County Community Supervision and Corrections Department (herein after referred to as "CSDS") and all of the following terms and conditions of community supervision during the defendant's period of community supervision.

ALL CONDITIONS OF COMMUNITY SUPERVISION ARE TO BE COMPLETED AT YOUR OWN EXPENSE UNLESS OTHERWISE STATED HEREIN.

Defendant to initial each condition:

- _____ 1. **REPORTING:** Report to the office of CSCD, at least monthly and at all other times as directed by CSCD. Provide honest and truthful information to the CSCD officer during all visits. Permit the CSCD officer to visit you at your home or place of employment. Should the community supervision of the Defendant be transferred to a supervising department of another county of this state or of another state, it is **ORDERED** that the defendant shall report in person or as directed by the San Patricio County CSCD officer at least monthly, until such time as San Patricio County CSCD receives notification of acceptance by the county or state where the defendant's community supervision is being transferred. If the defendant's community supervision is accepted by another county, the Defendant is **ORDERED** to report in person to the supervising officer of that department at least monthly and at all other times as directed by the supervising officer of that department. Should the county not accept transfer of the defendant's community supervision, the defendant is **ORDERED** to report in person to the supervising officer of the San Patricio County CSCD at least monthly, and at all other times as directed by the defendant's San Patricio County CSCD officer. The Defendant is **ORDERED** to report within two (2) business days, any change of address or change of employment to the Community Supervision Officer of San Patricio County, Texas.
- _____ 2. **PROHIBITED CRIMINAL ACTS:** Commit no offense against the laws of the State of Texas, or any other state or of the United States of America. Report within two (2) business days any arrest or contact with law enforcement to the CSCD Officer.
- _____ 3. **PROHIBITED CONDUCT:** Avoid injurious or vicious habits, and abstain from the consumption or possession of any alcoholic beverages and/or prohibited controlled substances or dangerous drugs in any form that are not prescribed by a licensed physician. Avoid places where the primary business is the sale and consumption of alcohol on the premises i.e. any bar, tavern, lounge or other similar place;
- _____ 4. **DRUG/ALCOHOL TESTING:** Submit to medical, chemical, or any other test or examination for the purpose of determining whether or not you are using or under the influence of alcohol, narcotic drugs, marijuana, or any other controlled substances.;
- _____ 5. **SUPPORT DEPENDENTS:** Support your dependents as provided by law. Provide your Community Supervision Officer with a copy of any and all court orders requiring payment of child support if such is requested.;
- _____ 6. **EMPLOYMENT:** Work faithfully at suitable employment and present written verification of employment (including all attempts to secure employment) once each month on the reporting date. Notify the CSCD officer orally and in writing of any change in employment within 48 hours of the change;
- _____ 7. **PROHIBITED SYNTHETIC SUBSTANCES:** Not possess or consume synthetic cannabinoid compound products in any form during the term of community supervision and submit to chemical testing upon request of the probation officer by providing a sample of urine.;

- _____8. **ALCOHOL/DRUG EVALUATION:** Submit yourself to a screening, assessment, and/or substance abuse counseling within **forty-five (45) days of this order**, and further if deemed appropriate participate in a substance abuse counseling program/Treatment Alternatives to Incarceration Program (or similar program) as determined by the Community Supervision and Corrections Department **beginning within thirty (30) days of completion of assessment**. Further, while in said program you are to cooperate and comply with all rules, regulations and pay any costs incurred and remain in said program until released by said treatment staff with the written concurrence of the Judge of this Court filed among the papers of this cause;
- _____9. **REIMBURSEMENT FEE:** Pay to the Supervision Officer of San Patricio County, Texas, a Statutory Reimbursement Fee of \$60.00 per month, beginning on or before the last day of this month and within the first ten (10) days of each month thereafter; Waived by the Court. Waived while reporting on multiple cases.
- _____10. **TRAVEL RESTRICTION:** Remain within the State of Texas unless given written permission to leave the State from the court or your CSCD officer. Notify the CSCD officer orally and in writing of any change in your home address within 48 hours of the change.
- _____11. **FINES, FEES AND COURT COSTS:** Pay to the designated San Patricio County Collections Office all of the assessed Court Costs, Fine and attorneys fees any/or other costs as has been Court ordered;
- _____12. **FINANCIAL AFFIDAVIT:** Submit an affidavit of inability to pay statement to the San Patricio County Community Supervision Officer for any month in which you fail to pay all or only part of your monthly Court-Ordered fees;
- _____13. **TRANSFER FEE:** Pay to the Supervision Officer of San Patricio County, Texas an application fee of \$100.00 for each interstate or intrastate transfer to community supervision, which is due within the first thirty days of community supervision, any transfers thereafter will require the fee to be paid on the date of application;
- _____14. **COMMUNITY SERVICE:** Complete _____ hours of Community Service Restitution for an organization, agency or subdivision of government approved by Court and designated by the Community Supervision and Corrections Department at a rate of not less than 8 hours per month.
- _____15. **RESTITUTION:** If applicable, pay to the Supervision Officer of San Patricio County, Texas, who shall pay the same over to the victim the amount of \$_____ as restitution and reparation on a monthly payment schedule to be determined by the San Patricio Community Supervision and Corrections Department;
- _____16. **JAIL TIME:** Serve a total of _____ days in the San Patricio County jail as a condition of community supervision beginning on _____ at _____ AM/PM and continuing through _____ at _____ AM/PM.

MISDEMEANOR SPECIAL CONDITIONS

The defendant shall also comply with the following special conditions as marked.

Academic Achievement: _____ (defendant's initials)

Provide proof of high school completion or participate in and successfully complete a community-based GED program or complete an Adult Basic Education Course. If needed, complete an ESL Course in lieu of the above. Written verification upon entrance and completion of the program must be provided to CSCD.

Anger Management: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete, within 180 days of this judgment, an outpatient Aggression Control and Therapy Treatment Program or Anger Insight Resolution program as directed by your CSCD officer.

BIPP: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete the outpatient Batterers Intervention Prevention Program sponsored by the Family Violence and Sexual Assault Prevention Center of South Texas, The Purple Door, Corpus Christi, Texas, and further cooperate fully with all treatment program requirements and obey all program rules, program regulations. The Defendant shall remain in said program until released by the Staff of the Family Violence and Sexual Assault Prevention Center of South Texas, The Purple Door, Corpus Christi, Texas, with the written concurrence of the Judge of this Court Filed among the papers of this cause;

No Firearms/Ammunition: _____ (defendant's initials)

The Defendant shall not have any firearms or ammunition in their possession or in their home.

No Victim Contact: _____ (defendant's initials)

The Defendant shall have NO contact with victim and/or complaining witness listed in the information in this case.

No Co-Defendant Contact: _____ (defendant's initials)

The defendant will not associate in any way or have any contact with any of the co-defendants in this case.

Moral Reconciliation Therapy: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete the Moral Reconciliation Therapy Program of the 36th, 156th, and 343rd Judicial Districts Community Supervision and Corrections Department. The Defendant shall obey all program rules and regulations and shall remain in said program until released by the Staff of the 36th, 156th, and 343rd Judicial Districts Community Supervision and Corrections Department with written concurrence of the Judge of this Court filed among the papers of the cause;

Anti-Theft Program: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete in the Anti-Theft Program. The Defendant shall enroll in and successfully complete, within 180 days of the judgment, an **anti-theft program**, through an agency approved by your CSCD officer.

Drug Offender Education: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete within 180 days of the judgment, a drug offender education program as provided in Article 6687b, Section 24, Vernon's Civil Statutes.

Alcoholic/Narcotic Anonymous Meetings: _____ (defendant's initials)

Participate in AA/NA at the direction of CSCD. Written verification of each meeting attended must be presented to CSCD.

Victim Impact Panel: _____ (defendant's initials)

The defendant shall enroll, attend, comply with all rules and regulations and successfully complete a DWI Victim Impact Panel approved by the Court within 120 days of the date of this Judgment.;

DWI 1st Education Program: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete a DWI Education Program as prescribed by Article 42.12, Section 13(h), Texas Code of Criminal Procedure, within 181 days of the date this judgment is signed.;

DWI 2nd Repeat Offender: _____ (defendant's initials)

The Defendant shall enroll in and successfully complete the DWI Intervention Program sponsored by ADAPT & ABC Defensive Driving, Corpus Christi, Texas, within 180 days of this Judgment;

Intensive Outpatient Treatment: _____ (defendant's initials)

The Defendant shall enroll in, fully participate in and successfully complete an Intensive Outpatient Substance Abuse Treatment Program.;

Probable Cause Testing: _____ (defendant's initials)

Furnish a sample of your breath, blood or urine at the request of any peace officer who has probable cause to believe the defendant may have committed any crime under Chapter 49 of the Texas Penal Code; intoxication and alcoholic beverage offenses. i.e. no breath test refusals.

Ignition Interlock: _____ (defendant's initials)

Within fourteen (14) days from the date of judgment the Defendant shall have a device installed, on the motor vehicle owned by the defendant or in the vehicle most regularly driven by the defendant, a deep-lung breath analysis device that makes impractical the operation of motor vehicle if ethyl alcohol is detected in the breath of the operation. This device shall be calibrated to .03 BAC and shall prevent the vehicle from being driven if the device detects ethyl alcohol on your breath. Do not operate any motor vehicle that is not equipped with an operational deep-lung breath analysis device. Abide by all rules and requirements under any participation agreement. Allow for the visual inspection of the monitor at the request of your CSCD officer. This device shall be installed for the duration of the Defendant's probation. The device is required to have a camera. All cost associated with this device are to be incurred by the Defendant.

Alternative Alcohol Monitoring: _____ (defendant's initials)

Within fourteen (14) days from the date of judgment the Defendant shall be in possession of a Smart Start In-Home **or** Smart Start In-Home Cellular device or SCRAM ankle monitor. The Defendant will not tamper with, remove or obstruct the monitor. The Defendant will abide by all rules and requirements under any participation agreement including not missing any communication times set out by the participant agreement. Allow visual inspection of the monitor at the request of your CSCD officer. This device shall be installed for the duration of the Defendant's probation. The device is required, if technology permits, a camera or visual recording device. All cost associated with this device are to be incurred by the Defendant.

Driver's License Suspension: _____ (defendant's initials)

Texas Driver's License is suspended for a period of _____ days effective within 20 days of the signing of the Judgment;

Residential Treatment Coastal Bend Regional Intermediate Sanction Facility: _____ (defendant's initials)

Submit yourself to the Coastal Bend Regional Intermediate Sanction Facility operated by the 36th, 156th, and 343rd Judicial Districts Community Supervision and Corrections Department in Sinton, Texas, for the purpose of a substance abuse evaluation and treatment. You are to cooperate and comply with all rules, regulations and contracts of the Coastal Bend Regional Intermediate Sanction Facility and remain in said facility until released by the Staff of the Coastal Bend Regional Intermediate Sanction Facility with the written concurrence of the Judge of this Court filed among the papers of this cause;

- Substance Abuse Misdemeanor Substance Abuse Treatment Track One (1) -- 90 days
- Substance Abuse Misdemeanor Employment & Substance Abuse Treatment Track Two(2)--90 days
- Substance Abuse Treatment – 180 days

MENTAL HEALTH TREATMENT: _____ (defendant's initials)

- Enroll and actively participate in the services of Coastal Plains Community Health Center (MHMR) within 30 days of this judgment. Attend treatment and programming as recommended. Comply with all rules, regulations and guidelines. Take all medications prescribed until successfully discharged or released by further order of the court. Submit written verification of your enrollment and attendance to your CSCD officer.
- Psychological/Psychiatric Exam: Within 60 days of the date of this order, submit to a psychological/psychiatric evaluation and participate in any treatment deemed necessary by said evaluation.

ADDITIONAL SPECIAL CONDITIONS: _____.

You are hereby advised that under the laws of this State, the Court shall determine the terms and conditions of community supervision, and may at any time during the period of community supervision, alter or modify the conditions of community supervision. The Court also has the authority at any time during the period of community supervision to revoke the community supervision when a preponderance of the evidence establishes a violation of one or more of the conditions set forth above.

Signed and entered on the _____ day of _____, 20_____.

Judge Presiding, San Patricio County Court at Law

Receipt of a copy of this order is acknowledged on the date shown above.

X _____
DEFENDANT'S SIGNATURE

CAUSE NO. _____

STATE OF TEXAS

COUNTY COURT AT LAW

V.

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OF

SAN PATRICIO COUNTY, TEXAS

TRIAL COURT'S CERTIFICATION OF DEFENDANT'S RIGHT TO APPEAL

I, Judge of the trial court, certify this criminal case:

- _____ is not a plea-bargain case and the defendant has the right of appeal.
- _____ is a plea-bargain case, but matters were raised by written motion filed and ruled on before trial and not withdrawn or waived and the defendant has the right of appeal.
- _____ is a plea-bargain case but the trial court has given permission to appeal and the defendant has a right of appeal.
- _____ is a plea-bargain case and the defendant has NO right of appeal.
- _____ the defendant has waived the right of appeal.

Signed and entered on the _____ day of _____, 20_____.

Judge Presiding, San Patricio County Court at Law

I have received a copy of this certification. I have also been informed of my rights concerning any appeal of this criminal case including any right to file a pro se petition for discretionary review pursuant to Rule 68 of the Texas Rules of Appellate Procedure. I have been admonished that my attorney must mail a copy of the court of appeals judgment and opinion to my last known address and that I have only 30 days in which to file a pro se petition for discretionary review in the court of appeals. Tex. R. APP. P. 68.2, 68.3 I acknowledge that, if I wish to appeal this case and if I am entitled to do so it is my duty to inform my appellate attorney, by written communication, of any change of address at which I am currently living. I understand that because of appellate deadlines if I fail to timely inform my appellate attorney of any change of address I may lose the opportunity to file a pro se petition for discretionary review.

x _____
 Defendant's Signature
 Mailing Address: _____

 Telephone: _____
 Email Address (if any) _____

x _____
 Defense Counsel: _____
 State Bar No: _____
 Mailing Address: _____
 Telephone: _____
 Facsimile: _____
 Email Address _____

Defendant's Right Thumbprint

