	IN THE CIRCUIT COURT OF		COUNTY, MISSISSIPPI	
STAT	TE OF MISSISSIPPI			
VERSUS CAUSE NO				
DEF	ENDANT			
	This form must be completely filled Please fill out a separate	· · · · · · · · · · · · · · · · · · ·		
	PETITION TO	ENTER PLEA OF G	<u>UILTY</u>	
	<ol> <li>The Defendant, after having been first duly sworn, on oath, represents unto the Court as follows:</li> </ol>			
A.	My full legal name is:			
	I also use or have used the following	ng names, nicknames	, and/or aliases:	
В.	My personal address is:		·	
C.	I am represented by the following			
D.	D. My date of birth is:			
E.	My social security number is:			
F.	F. I have completed school up to the following grade or level:			
	I can read and write in English.	Yes	No	
G.	I am a veteran or a current member	er of the United State	es Armed Forces.	
	Yes No	If yes, which branch	:	
	Type of discharge, if applicable:			
Н	I am pleading guilty by way of:	Indictment	Bill of Information	
A CC	PPY OF THE DEFENDANT'S INI BILL OF INFORMATION MU			

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Defendant's Initials \_\_\_\_\_

I. I have been **charged** with the following crime(s), which carry the following potential sentence(s):

Count No.	Charge, Enhancements, & Code Section	Min. Years	Max. Years	Min. Fine	Max. Fine
	TOTALS:				

J. I wish to **plead guilty** to the following crime(s), which carry the following potential sentence(s):

Count No.	Charge, Enhancements, & Code Section	Min. Years	Max. Years	Min. Fine	Max. Fine
	TOTALS:				

K.	As a result of my guilty plea for the above-listed crimes, the District Attorney's Office has agreed to dismiss or not pursue the following charges or enhancements (please list specific counts and cause numbers and/or item numbers):

L.	There are other unresolved charges pending against me, for which I have been neither arrested nor indicted.			
	Yes No			
	If yes, list the charges, the county in which the charges are pending, and the District Attorney's agreement as to these charges:			

M. I have told my attorney all of the facts and circumstances that I know about the charge(s) against me, and I believe my attorney is fully informed on all matters relating to the charge(s) against me. My attorney has counseled me and advised me on the nature of each charge, on all lesser included charge(s), and on all possible defenses I may have.

After consulting with my attorney, I am entering my **plea of guilty** freely and voluntarily, of my own accord, and with my full understanding of all matters set forth in my Indictment or Waiver of Indictment and Bill of Information, in this Petition, and in the Certificate of Attorney included at the end of this Petition.

- N. I understand that I may plead **not guilty** to any charge against me, and if I choose to plead **not guilty**, the United States Constitution guarantees me the following rights:
  - i. The right to a speedy and public trial by jury;
  - ii. The right to see, hear, and face in open Court all witnesses called to testify against me and the right to cross-examine those witnesses;
  - iii. The right to compel the production of any evidence, including the attendance of any witnesses in my favor;
  - iv. The right to have the assistance of an attorney at all stages of the proceedings;
  - v. The presumption of innocence, i.e., the State must prove beyond a reasonable doubt that I am guilty;
  - vi. The right to testify and, if I do not testify, I understand the jury will be instructed that this shall not be held against me; and
  - vii. The right to appeal my case to the Mississippi Supreme Court if I am convicted at trial.
- O. I understand that if I plead **guilty**, the Court may impose the same punishment as if I had pled **not guilty**, stood trial, and was convicted by a jury.
- P. I further understand that I am waiving my right to appeal any issue related to the charge(s) in this case.
- Q. I understand that there is no agreement between me and/or my attorney with the District Attorney. The District Attorney may make a recommendation to the Court; HOWEVER, the Court is NOT bound by this recommendation. The Court may impose the maximum penalties for the offense(s), and nobody has promised me otherwise.

R.	R. I certify that no judge, officer, or agent of any branch of government (federal, state, local) has made any promise or suggestion of any kind to me, or to my knowledge, tha will receive a lighter sentence, probation, or any form of leniency if I plead guilty.			
S.	I have been convicted of one or more felonies in the past Yes No			
	If yes, please list the offense(s), the year(s) of conviction, and the location(s) of the conviction(s):			
Т.	I am presently on probation or parole in a state or federal court of the United States.			
	Yes No			
	I understand that pleading guilty to this charge may cause a revocation of my probation or parole, which could result in a prison sentence and/or an adjudication of guilty on the underlying offense if I was not previously adjudicated guilty. Moreover, I understand that if my parole or probation is revoked, my sentence in this present case may be imposed consecutively to any sentence I may receive if my prior case is revoked. Finally, I understand that if I am currently a participant in <i>any</i> Drug Court or Intervention Court program in any state or federal jurisdiction, this plea of guilty may cause a revocation of my Drug Court or Intervention Court participation.			
U.	I am a citizen of the United States Yes No			
	I understand that if I am not a United States citizen, pleading guilty may have immigration consequences. I understand that a criminal conviction may lead to my removal from the United States, the denial of United States citizenship, or the denial of my future admission into the United States.			
V.	I am physically and mentally competent to enter this plea of guilty. At this time, I a not under the influence of any drugs, alcohol, or other intoxicants. If I am current taking medication, I certify that I am taking my medication as prescribed by n physician, and the medication does not impair my ability to competently enter a ple today.			
W.	I understand that any period of incarceration imposed is to be served in the custody of the Mississippi Department of Corrections under the provisions of Mississippi Code of 1972 § 47-5-138, as amended, and any portion of said sentence that is served under Post-Release Supervision is to be served under the provisions of § 47-7-34.			
Χ.	I understand that if the Court places me on probationary status through the 15 <sup>th</sup> Circuit Intervention Court and I do not successfully complete the program, the Court can revoke my probationary status, adjudicate me guilty, and sentence me as provided by law.			

- Y. If the Court places me on **probation or post-release supervision**, I understand that, in addition to the special conditions outlined in the Court's Sentencing Order, I will be subject to the following conditions:
  - i. Commit no offense against the laws of the United States, the laws of this state, or the laws of any other state in the United States;
  - ii. Avoid injurious or vicious habits and persons as well as places and persons of disreputable or harmful character;
  - iii. Report to the Mississippi Department of Corrections and pay required fees as directed;
  - iv. Permit Defendant's Field Officer to make home or work visits:
  - v. Work faithfully at suitable employment, so far as possible;
  - vi. Possess or consume no alcoholic beverages or mood altering drugs, and possess no firearm or other deadly weapon;
  - vii. Remain within a specified area, and abide by a curfew;
  - viii. Support any dependents;
    - ix. Submit, as provided in Section 47-5-603 of the Mississippi Code of 1972, to any type of breath, saliva or urine chemical analysis test, the purpose of which is to detect the possible presence of alcohol or substance prohibited or controlled by any law of the State of Mississippi or the United States, or to tests recommended by Defendant's Field Officer;
    - x. Participate in any recognized program available and recommended by Defendant's Field Officer; and
    - xi. Pay any imposed electronic monitoring fees in a timely manner.
- Z. If the Court places me on probationary status under the 15<sup>th</sup> Circuit Intervention Court Program, I understand that, in addition to the special conditions outlined in the Court's Sentencing Order, I will be subject to the following conditions:
  - i. Commit no offense against the laws of the United States, the laws of this state, or the laws of any other state in the United States;
  - ii. Avoid injurious or vicious habits and persons as well as places and persons of disreputable or harmful character;
  - iii. Report to the Intervention Court personnel and pay required fees as directed;
  - iv. Permit Intervention Court Personnel to make home or work visits;
  - v. Work faithfully at suitable employment, so far as possible;
  - vi. Possess or consume no alcoholic beverages or mood altering drugs, and possess no firearm or other deadly weapon;
  - vii. Remain within the State of Mississippi, and abide by a curfew;
  - viii. Support any dependents;
  - ix. Submit, as provided in Section 47-5-603 of the Mississippi Code of 1972, to any type of breath, saliva or urine chemical analysis test, the purpose of which is to detect the possible presence of alcohol or substance prohibited or controlled by any law of the State of Mississippi or the United States, or to tests recommended by Intervention Court Staff;
  - x. Participate in any recognized program available and recommended by Intervention Court Staff, including Alcoholics/Narcotics Anonymous meetings, Pine Belt Mental Health programs, or the ACTS program; and
  - xi. Pay any imposed electronic monitoring fees in a timely manner.

# 2. Please be advised of the following warnings, which may or may not apply to your case:

#### A. Habitual Criminals Pursuant to Miss. Code Ann. § 99-19-81:

If you have been convicted of two (2) or more felonies, upon charges separately brought and arising out of separate incidents at different times, and have been sentenced to separate terms of one (1) year or more in any state and/or federal prison, be advised that if you are convicted of another felony, you shall be sentenced to the maximum term of imprisonment prescribed for such a felony. Such sentence may not be reduced or suspended, nor will you be eligible for parole or probation.

#### B. Habitual Criminals Pursuant to Miss. Code Ann. § 99-19-83:

If you have been convicted of two (2) or more felonies, upon charges separately brought and arising out of separate incidents at different times ,and have been sentenced to and served separate terms of one (1) year or more in any state and/or federal prison, whether served concurrently or not, and one (1) of such felonies was a <u>crime of violence</u>, be advised that if you are convicted of another felony, you shall be sentenced to <u>life imprisonment</u>. Such sentence may not be reduced or suspended, nor will you be eligible for parole or probation.

## C. Second and Subsequent Offenders Pursuant to Miss. Code Ann. § 41-29-147:

If you have been convicted of a crime under any statute of the United States or of any state relating to narcotic drugs, marijuana, depressants, stimulants, or hallucinogenic drugs, be advised that if you are convicted of a second and subsequent offense relating to any of the aforementioned categories, you may be imprisoned for a term up to twice the term authorized and/or fined an amount up to twice the amount authorized.

# D. <u>Driver's License Suspension Pursuant to Miss. Code. Ann. § 63-1-71:</u>

In addition to any penalty authorized by the Uniform Controlled Substances Law or any other statute, every person convicted of driving under the influence of a controlled substance, or entering a plea of nolo contendere thereto, in any court of this state, another state, or the United States, shall forfeit his right to operate a motor vehicle over the highways of this state for a period of not less than six (6) months.

### E. Registration for Sex Offenses Pursuant to Miss. Code Ann. § 45-33-25:

If you are pleading guilty to an offense defined as a "sex offense" under Miss. Code Ann. § 45-33-23, you will be required to register as a sex offender in the State of Mississippi within the time and manner set out in Miss. Code Ann. §§ 45-33-25 and 45-33-31. If you fail to comply with these registration requirements, you may be charged and punished.

# **AFFIDAVIT**

BEFORE M	E, the undersigned authority	in and for said C	ounty and State, this day
personally came an	d appeared		, who being by me first
duly sworn as the la	aw directs, says on oath that h	ne or she has read t	he above Petition to Enter
Plea of Guilty and t	hat everything contained ther	ein is true and corr	ect and further that his or
her attorney has con	mpletely and thoroughly gone	over the Petition to	Enter Plea of Guilty with
him or her by readi	ng and fully explaining it to hi	m or her.	
AFFIANT fu	orther states that he or she fu	ally understands ev	verything contained in the
document and that l	nis or her plea of guilty is made	by him or her freel	y, knowingly, intelligently,
and voluntarily.			
AFFIANT ur	nderstands that any false state	ement made by him	or her about a material in
this document could	l subject him or her to prosecu	tion for perjury.	
WITNESS M	IY SIGNATURE, this the	day of	, 20
		DEFENDA	NT/AFFIANT
SWORN TO	AND SUBSCRIBED before me	e, on this the	day of,
20			
		CIRCUIT C	I EDIZ
		CINCUIT	LEIM

#### CERTIFICATE OF COUNSEL

The undersigned, as Lawyer and Counselor for the above Defendant, hereby certifies:

- 1. I have read and fully explained to the Defendant the allegations contained in the Indictment or Waiver of Indictment and Bill of Information in this case;
- 2. To the best of my knowledge and belief, the statements, representations, and declarations made by the Defendant in the foregoing Petition are in all respects accurate and true;
- 3. I have explained the minimum and maximum penalties for each count to the Defendant and consider him or her competent to understand the charges against him or her and the effect of his or her Petition to Enter a Plea of Guilty;
- 4. The plea of guilty offered by Defendant in this Petition accords with my understanding of the facts her or she has related to me and is consistent with my advice to the Defendant;
- 5. In my opinion, the plea of guilty as offered by the Defendant in the Petition is voluntarily and understandingly made. I recommend the Court accept the plea of guilty;
- 6. Having discussed this matter carefully with the Defendant, I am satisfied, and I hereby certify that in my opinion, he or she is mentally and physically competent; there is no mental or physical condition that would affect his or her understanding of these proceedings; and, further, I state that I have no reason to believe that he or she is presently operating under the influence of drugs or intoxicants;
- 7. I have not promised or stated to the Defendant that he or she will receive a particular sentence, nor I have a speculated with him or her how much time or percentage of any sentence he or she will have to serve before becoming eligible for any type of release from custody by any means or methods; and
- 8. I have attached a copy of the Indictment or Waiver of indictment and Bill of Information to this Petition.

Signed by me in the presence of the above-named Defer	ndant and after full discussion of the
contents of this certificate with the Defendant, this the	day of,
20	
- -	ATTORNEY FOR DEFENDANT