

**IN THE CIRCUIT COURT OF THE SEVENTH JUDICIAL CIRCUIT
PUTNAM COUNTY, FLORIDA**

STATE OF FLORIDA

vs.

CASE NO(s): _____

DEFENDANT _____ /

PLEA AGREEMENT - ACKNOWLEDGMENT AND WAIVER OF RIGHTS

I, the undersigned Defendant, am entering a plea of guilty or no contest to the charge(s) against me, and I acknowledge the following:

1. I am pleading to the charge(s) of:

Count	Description	Degree (e.g. F3; M1)	Maximum Imprisonment (Indicate if a Min. Mandatory Applies)	Maximum Fine

A Continuation Sheet is enclosed and incorporated by reference:

2. I understand that if the Court accepts my plea to the charge(s) listed above, my sentence will be:

3. **Waiver of Constitutional Rights:** I understand that I have the right to be represented by an attorney at every stage of the proceeding and, if necessary, an attorney will be appointed to represent me. I have the right to both a jury trial and an attorney's help at that trial. At that trial the State must prove I am guilty beyond and to the exclusion of a reasonable doubt. I have the right to compel attendance of witnesses on my behalf, the right to see, confront, and cross-examine witnesses against me, and the right not to testify or to incriminate myself. By pleading guilty or no contest, I understand I am waiving my right to a trial and **I am voluntarily waiving all of these other trial rights.**

4. I understand that by pleading guilty or no contest, unless I expressly reserve the right to appeal a prior ruling of the Court, I give up the right to appeal all matters relating to the Court's judgment, including my guilt or innocence. I am also giving up the right to have motions filed, witnesses interviewed, and the right to present any defenses I may have to the charges.

5. I understand the judge may ask me questions about the charges, and if I answer these questions under oath, on the record, and in the presence of my lawyer, those answers could be used in any later prosecution for perjury. Unless otherwise indicated, I am waiving my right to a presentence investigation and recommendation.

6. I admit that there is a factual basis for the charges to which I am pleading. I am either factually guilty or believe I am innocent yet believe this plea agreement to be in my best interest.

7. Unless otherwise ordered, I understand I am responsible for payment of all applicable costs as required by Chapter 938, Florida Statutes. Upon request of the State and discussion with my attorney, I hereby waive a hearing on documented law enforcement investigative costs pursuant to Fla. Stat. § 938.27 and stipulate to the entry of \$100 (\$50 for misdemeanors) for the cost of investigation. I also agree to the imposition of the minimum fee of \$100 (\$50.00 for misdemeanors) for cost of prosecution and waive a hearing on these discretionary costs. If the court has appointed counsel to represent me, I understand I am liable for payment of attorney's fees, costs and application fee, pursuant to Fla. Stat. § 938.29, for which a lien may be imposed. If an offense to which I am pleading is one for which automatic, mandatory driver's license suspension or revocation is required by law to be imposed either by the court or by a separate agency, the plea will provide the basis for said suspension or revocation.

8. Other than the proposed sentence set out above, no one has made any promises or guarantees to me, nor in any way forced or threatened me to enter this plea. I am doing this freely and voluntarily. I am not currently under the influence of any substance that may affect my ability to understand these proceedings. I do not have any untreated mental illness, to the best of my knowledge, that would keep me from understanding this plea and its consequences.

9. I understand that if my sentence includes incarceration, the Department of Corrections, or jail facility, are solely responsible for awarding gain time or any type of early release. Any information I have received concerning gain time or early release is strictly an estimate and is not a part of my plea agreement.

10. I am represented by the undersigned attorney. I have discussed my case with my attorney. Any questions I have had about my case have been answered to my satisfaction by my attorney. I feel my attorney has represented me to the best of their ability, and I am satisfied with this representation.

11. I understand that I have the right to appeal the judgment and sentence of the Court within thirty (30) days from the date of sentence. I understand that if I miss that deadline the appeals court may deny my appeal. I understand that if I wish to appeal and cannot afford an attorney to help me in my appeal, the Court will appoint an attorney to represent me for that purpose.

12. I understand that if I am not a citizen of the United States, the plea will subject me to deportation proceedings and/or detention proceedings pursuant to the federal customs and immigration laws and regulations governing the United States Department of Homeland Security.

13. I understand that my plea in this case and adjudication, whether withheld or not, may be used to enhance any sentence I may receive with regard to crimes, pending or future, for which I may be prosecuted.

14. I am unaware of the existence of any physical evidence containing DNA that could exonerate me of any of the charges to which I am pleading.

15. I understand that if any offense to which I am pleading is a sexually violent or sexually motivated offense, or, if I have been previously convicted of such an offense, this plea may subject me to involuntary civil commitment as a sexually violent predator upon completion of my sentence.

Date: _____ Defendant's Signature: _____

ACKNOWLEDGMENT OF COUNSEL

I, the undersigned member of the Florida Bar, hereby represent to the Court that I represent the above-named Defendant; that I reviewed and explained the PLEA AGREEMENT - ACKNOWLEDGMENT AND WAIVER OF RIGHTS to the Defendant; and to the best of my knowledge and belief, the Defendant fully understands its contents. I am unaware of the existence of any physical evidence containing DNA that could exonerate my client of any of the charges to which a plea is being entered.

Defense Counsel (Print): _____

Signature: _____

Fla. Bar No.: _____ Date: _____

ACKNOWLEDGMENT AND ACCEPTANCE BY STATE

I certify to the Court that I am unaware of the existence of any physical evidence containing DNA that could exonerate the defendant of any of the charges to which a plea is being entered.

Assistant State Attorney (Print): _____

Signature: _____

Fla. Bar No.: _____ Date: _____

ORDER ACCEPTING PLEA

The foregoing plea document was received and accepted in open court. The Defendant signed or acknowledged signing this document while under oath and subject to the penalties of perjury. The court finds the plea to be freely and voluntarily entered and that a factual basis exists in the record for the court to accept it. The Defendant understands the nature of the charges and all of the consequences of this plea. By accepting this plea(s), the court is not required to follow any state or defense recommendation stated herein, unless a "Conditional Plea" is fully described above.

Date: _____

CIRCUIT JUDGE