

**IN THE COURT OF COMMON PLEAS OF MONTGOMERY COUNTY, PENNSYLVANIA
CRIMINAL DIVISION**

COMMONWEALTH OF PENNSYLVANIA : **CRIMINAL DOCKET NUMBER:**

V. :

:

GUILTY PLEA

You are present before this Court because you, or your attorney, have indicated your desire to enter a plea of guilty to some or all of the criminal offenses with which you have been charged.

Please fully answer all of the questions on these papers. If you do not understand a question, indicate that you do not understand by putting a question mark ("?") in front of the number of the question you do not understand. The question will be explained to you.

When you have completed the questions, be sure to ask your attorney, the attorney for the Commonwealth (Assistant District Attorney), or the Judge to explain any questions you did not fully understand. The question will be explained and you must fully understand it. Answer all of the questions before you sign at the bottom of the last page.

RULE 119 CONSENT
FOR USE OF TWO-WAY SIMULTANEOUS AUDIO-VISUAL COMMUNICATION

- (1) I understand that there are certain criminal proceedings at which I have a constitutional and/or statutory right to be physically present.
- (2) I have discussed with my attorney, the attorney for the Commonwealth (Assistant District Attorney), and/ or the Judge my right to be physically present for certain criminal proceedings.
- (3) I consent to today's criminal proceeding being conducted using two-way simultaneous audio-visual communication.
- (4) I am aware that I have the right to confidentially communicate with my attorney immediately prior to and during the proceeding.

Date: _____

SIGNATURE OF DEFENDANT

The Defendant is unavailable to sign this form, but has consented to the use of two-way simultaneous audio-visual communication pursuant to Rule 119 and stated such consent on the record in open court at the Hearing on this date. Further, the undersigned has discussed the proceeding and related forms with the Defendant and is satisfied that the Defendant has a full understanding of his/her rights and the documents. The Defendant has granted permission to allow the undersigned to sign and initial this form and any other form(s) necessary for today's Hearing on the Defendant's behalf.

Date: _____

ATTORNEY FOR DEFENDANT

1. Can you read, write and understand the English language?
_____ **YES** _____ **NO**
2. What is your full name? _____
3. Are you known by any other name or alias? _____ **YES** _____ **NO**
4. If the answer to Question #3 is **YES**, by what other name(s) are you known?

5. How old are you today? _____
6. How far did you go in school? (Highest grade completed) _____
7. Have you ever been a patient in a mental institution or have you been treated for mental illness? _____ **YES** _____ **NO**
8. If the answer to Question #7 is **YES**, please explain the details:

9. Are you now being treated for mental illness? _____ **YES** _____ **NO**
10. If the answer to Question #9 is **YES**, please explain the details:

11. If the answer to Question #9 is **YES**, do you still feel you can understand what you are doing today? _____ **YES** _____ **NO**
12. If the answer to Question #9 is **YES**, are you under the influence of any medications or drugs which would affect your ability to understand these proceedings? _____ **YES** _____ **NO**
13. Do you know that you are here to plead guilty to some or all of the criminal charges against you? _____ **YES** _____ **NO**

14. Has your attorney explained to you all the things that a person must have done to be guilty of the crime or crimes to which you are pleading guilty?
_____ **YES** _____ **NO**
15. Do you admit that you did all the things a person must have done to be guilty of the crime or crimes to which you are pleading guilty?
_____ **YES** _____ **NO**
16. Do you know that you have a right to a trial by jury? (Except for certain crimes)
_____ **YES** _____ **NO**
17. Do you understand that the right to a trial by jury means that you can take part in the selection of the jury with your attorney; that the jury is chosen from the voters registration list and licensed drivers of Montgomery County, and that all 12 people on your jury must agree on your guilt beyond a reasonable doubt, before you can be convicted of the crime or crimes with which you are charged?
_____ **YES** _____ **NO**
18. Do you know you are presumed innocent until found guilty?
_____ **YES** _____ **NO**
19. Do you understand that the Commonwealth must prove your guilt beyond a reasonable doubt before you can be convicted of the crime(s) charged?
_____ **YES** _____ **NO**
20. Do you understand that it is the Commonwealth that has the burden of proving your guilt beyond a reasonable doubt; that you do not have to prove your innocence?
_____ **YES** _____ **NO**
21. Do you know you have the absolute right to remain silent and neither the Judge nor the jury can hold it against you, if you refuse to testify?
_____ **YES** _____ **NO**

22. Do you understand the maximum sentence and fine that you could receive for the crime or crimes to which your pleading guilty, and that the sentences for each crime to which you are pleading guilty could be made to run consecutively (one after another)? _____ **YES** _____ **NO**
23. Do you understand that the Pennsylvania Sentencing Code provides that for sentences involving incarceration [whether a State or County sentence); a minimum and maximum sentence must be ordered; there is no requirement that you are to be paroled after the passage of the minimum sentence; in fact, you have no right to be paroled at all? _____ **YES** _____ **NO**
24. Are you aware that the Judge does not have to sentence you to the term of probation or jail sentence upon which your attorney and Assistant District Attorney have agreed? _____ **YES** _____ **NO**
25. Do you understand that if the Judge does not accept the plea agreement, you may withdraw your guilty plea? _____ **YES** _____ **NO**

After you enter your guilty plea and it is accepted by the Judge, you still have a right to appeal your conviction. Your appeal from a guilty plea is limited to any or all of the following four (4) reasons, that:

- 1. your guilty plea was not voluntary, or knowing, or intelligent:**
- 2. the Court did not have jurisdiction (authority) to accept your plea because the crime(s) to which you are pleading guilty did not occur in Montgomery County**
- 3. the Judge's sentence is illegal because it is beyond the maximum penalties authorized by law:**
- 4. your attorney was not effective in representing you.**

26. Do you understand the four reasons for appeal? _____ **YES** _____ **NO**

You have the right to file a post-sentence motion within ten (10) days from today. Your post-sentence motion may include:(i) a motion to challenge the validity of a plea of guilty or nolo contendere, or the denial of a motion to withdraw a plea of guilty or nolo contendere; (ii) a motion for judgment of acquittal; (iii) a motion in arrest of judgment; (iv) a motion for a new trial; and/ or (v) a motion to modify sentence. If you challenge the validity of your plea, you must state one or more of the above four reasons. If the Court rules against you, you have thirty (30) days from the date of the order denying your motion in which to file an appeal to the Superior Court. If the Court should fail to rule on your motion at all, then one hundred twenty (120) days after you filed it, it is considered to be denied by operation of law. You have thirty (30) days from the denial of your motion by operation of law to file an appeal to the Superior Court. If you do not file a post-sentence motion, you must file your notice of appeal within thirty (30) days of today. You have the right to assistance of counsel in preparing and filing your post-sentence motions. You also have the right to have counsel argue these motions and write any necessary briefs or memoranda. You also have the right to assistance of counsel in filing, preparing and arguing an appeal to the Superior Court, if the Court should deny post-sentence motions. If you cannot afford to hire counsel, one will be provided free of charge. You do not have to file post-sentence motions in order to preserve the appeal issues raised during your guilty plea or sentencing, but may appeal directly to the Superior Court after sentence and within thirty (30) days.

27. Do you understand the meaning of the various rights that have just been explained you? _____ **YES** _____ **NO**
28. Has anyone forced you to enter this plea of guilty? _____ **YES** _____ **NO**
29. Are you doing this of your own free will? _____ **YES** _____ **NO**
30. Have any threats been made to you to enter a plea of guilty?
_____ **YES** _____ **NO**

31. Have any promises been made to you to enter a plea of guilty, other than any plea agreement that has been negotiated for you by yourself or your attorney?
_____ **YES** _____ **NO**
32. Are you satisfied with you attorney's representation? _____ **YES** _____ **NO**
33. Have you had sufficient time to talk to your attorney before reading this paper and deciding to plead guilty? _____ **YES** _____ **NO**
34. Has your attorney told you what the words on this paper mean?
_____ **YES** _____ **NO**
35. Your guilty plea is based on factual accusations placed in writing by the police and sworn to before a District Justice who issued an arrest warrant for these charges. Are you willing to allow the Assistant District Attorney to summarize the facts on which you plead? _____ **YES** _____ **NO**
36. Are your presently on probation or parole? _____ **YES** _____ **NO**
37. If you are on probation or parole, do you realize that your guilty plea may mean the plea is a violation of your probation or parole and that you can be sentenced to prison as a result of that violation? _____ **YES** _____ **NO**
38. Do you understand that the decision to enter a plea of guilty plea is yours and yours alone?
_____ **YES** _____ **NO**
39. Do you know that you do not have to enter a plea of guilty and give up all rights as previously explained to you, and that no one can force you to enter a guilty plea?
_____ **YES** _____ **NO**
40. Do you understand you have a right to a pre-sentence investigation (PSI) which will give the Court a statement of your past performance in the areas of: education; criminal history; family situation; disabilities; and general information regarding your plea to assist the Judge in sentencing?
_____ **YES** _____ **NO**

41. Do you understand that a P.S.I. is usually waived if your plea agreement is accepted because the information is not needed for sentencing by the Judge?
_____ **YES** _____ **NO**
42. Do you waive the P.S.I. in this case? _____ **YES** _____ **NO**
43. Do you understand you have a right to be sentenced within ninety (90) days of today?
_____ **YES** _____ **NO**
44. Do you waive your right to be sentenced within ninety (90) days of today?
_____ **YES** _____ **NO**
45. You may be required to begin intake processing at Montgomery County's Adult Probation Office. If you are so required, do you understand that you must provide full and true contact information to the Court on the Adult Probation Offender Contact Information Form or else be subject to the penalties of Section 4904 of the Pennsylvania Crimes Code?
_____ **YES** _____ **NO** _____ **N/A**
46. If you are sentenced today, it is your duty to contact the Adult Probation Office at (610) 992-7777 between the hours of 9:00 a.m. and 2:00 p.m. no later than the next business day after this guilty plea. Do you understand that if you do not contact the Adult Probation Office in this time frame, your failure to do so will be considered a violation of your probation/parole and you could be arrested and imprisoned for this violation?
_____ **YES** _____ **NO** _____ **N/A**
47. Do you understand and agree that a judge other than the judge hearing this Guilty Plea may be assigned to hear and rule upon subsequent allegations of violations of your probation/parole and resentence you in the event of a proven violation?
_____ **YES** _____ **NO** _____ **N/A**

48. Do you understand that if you are not a United States citizen a guilty plea may result in action by the federal immigration enforcement agencies up to and including deportation? _____ **YES** _____ **NO**

49. Do you understand that in addition to the imposition of costs of prosecution which is mandatory, as part of your sentence, you must pay:

restitution in the amount of \$ _____

a fine in the amount of \$ _____

in equal monthly installments over the length of your supervisor?

_____ **YES** _____ **NO**

50. Do you have or will you have the ability to pay the costs of prosecution,

restitution, fine, in equal monthly installments over the length of your supervisor?

_____ **YES** _____ **NO**

51. If you are pleading guilty to an offense graded as an M-1 or higher; an offense specified in 18 Pa. C.S.A. 6105(a) or (b); a drug conviction punishable by more than two years imprisonment; have three or more driving under the influence convictions within five years; are subject to an active/final protection from abuse order; or have a misdemeanor conviction for a crime of domestic violence; do you understand that if you possess a license to carry a firearm, pursuant to 18 Pa.C.S.A. 6109(i.1)(1), notification of your conviction will be sent to the sheriff of the county in which you reside, and your license to carry a firearm may be revoked by the issuing authority?

_____ **YES** _____ **NO**

ACT 79 Firearms Relinquishment (if applicable)

52. Do you understand that you are entering a guilty plea to a misdemeanor crime of domestic violence pursuant to 18 Pa.C.S.A. 6105(c)(9)? _____ **YES** _____ **NO**

53. Do you understand that, because of your guilty plea you will be convicted of a misdemeanor crime of domestic violence pursuant to 18 Pa.C.S.A. 6105(c)(9); and as a result, you are prohibited from ever owning, using, or possessing a firearm or ammunition?

_____ **YES** _____ **NO**

54. Do you understand that, within twenty-four (24) hours of this conviction, you are required to relinquish any and all firearms in your possession or control to the specified agency or specified licensed dealer ordered by the court? _____ **YES** _____ **NO**

55. Do you understand if the court orders relinquishment to a licensed dealer as permitted by 18 Pa.C.S.A. 6105.2(c), you shall submit an affidavit complying with 18 Pa. C.S.A.6105.2(c)(3) to the specified police department as ordered by the court?

_____ **YES** _____ **NO**

56. Do you understand if you fail to relinquish any and all firearms or provide an affidavit within twenty-four (24) hours of this conviction, you may be further prosecuted pursuant to 18 Pa.C.S.A 6105(c)(9) and/or 18 Pa. C.S.A. 6105.2? _____ **YES** _____ **NO**

Driving After Imbibing Alcohol or Utilizing Drugs Cases (if applicable)

57. The DUI statute has escalating mandatory minimum sentences. That means the more often you are convicted of DUI within a 10 year period, the mandatory minimum penalties of jail and fines increase. Your third or subsequent DUI within 10 years could subject you to a minimum of one year in state prison, depending on what alcohol or drugs are in your blood at the time. Do you understand? _____ **YES** _____ **NO**

58. Do you understand that as a result of your guilty plea today your driver's license is going to be suspended? _____ **YES** _____ **NO** _____ **N/A**

59. If you are convicted of driving while your license is suspended for DUI, you will be sentenced to a mandatory minimum of 60 days in jail just for driving while suspended. Your sentence will be at least 90 days in jail if you have any drugs or alcohol in your blood at the time you are driving. Do you understand?

_____ YES _____ NO _____ N/A

60. Your license will not be considered reinstated until Penn DOT sends it back to you and you have the license in your possession. Do you understand?

_____ YES _____ NO _____ N/A

61. You have a right to have the Court Reporting Network assessment to determine if you need treatment for substance abuse before sentencing. Do you wish to waive that right and be sentenced today? _____ YES _____ NO

62. Do you understand all of the consequences of pleading guilty today?

_____ YES _____ NO

I swear/affirm that I have completely read the above document. I understand it. I want to enter a plea of guilty to some or all of the crimes with which I am charged. I further swear/affirm that the signature and initials on this document are mine. Furthermore, my attorney has thoroughly reviewed with me all offers that have been made to resolve this case.

SIGNATURE OF DEFENDANT

DATE

I, _____, Esquire, state that I have advised my client of the meaning of this document; that it is my belief that the defendant understands what is set forth above; that I am prepared to try this case; and that the defendant understands what he/she is doing by entering a plea of guilty. Furthermore, I have discussed with my client any and all guilty plea offers and the consequences of accepting or rejecting the final offer in this case.

SIGNATURE OF ATTORNEY

DATE



RULES, REGULATIONS, AND SPECIAL CONDITIONS OF SUPERVISION

MONTGOMERY COUNTY ADULT PROBATION AND PAROLE DEPARTMENT
408 CHERRY STREET, PO BOX 311, NORRISTOWN, PA 19404

1. I will report regularly **in person**, by mail, or online (MonitorConnect) as determined by my officer. The responsibility to report falls upon me, the offender.
2. I must comply with all local, state, and federal criminal laws. I will notify my officer immediately if I am arrested by or if I am cooperating with any law enforcement agency. I will not enter into any agreement to act as a confidential informant for any law enforcement agency without permission from my officer. Furthermore, I will conduct myself in a manner that I will not create a danger to the community or myself.
3. My officer will make supervision visits in my home. I will provide access to the dwelling in which I reside. Prior to changing my residence, I must have the permission of my officer. Firearms and/or lethal weapons are prohibited in my residence and/or on my property.
4. I will make every effort to obtain and maintain employment and support my dependent(s). I will notify my officer within 72 hours of any change. If I change my employment, I should have another position arranged.
5. My daily travel is limited to the adjoining counties. Any travel beyond those counties, out of state, or overnight travel must be approved 72 business hours prior to the event. Permission to travel must be obtained from my officer prior to my departure. Travel outside of the United States will require written approval from the visiting country's consulate, and fines, costs, and restitution must be paid in full.
6. I will pay all fines, costs, and restitution in monthly installments as directed by the Court. Payments are to be sent to the **Clerk of Courts, Courthouse, P.O. Box 311, Norristown, PA 19404**.
I am advised that all amounts over \$1,000 will cause a lien and filing fees to be placed against me. Further, my failure to pay my fine, costs, and restitution as directed by the Court may result in my account balance being submitted to a collection agency. An additional 25% collection charge will be added to my account balance.
7. I will cooperate and participate in any medical, psychological, and/or psychiatric examination, test, treatment and/or counseling as directed by the Court. If I enroll in treatment or counseling, I will immediately notify my officer and sign a confidential release with my treatment provider. I will remain in said program until released by my officer or until the satisfactory completion of said program.
8. I will abstain from the unlawful possession, use or sale of narcotics or other dangerous drugs and drug paraphernalia. I will submit urine sample(s) and/or breathalyzer upon request of my probation/parole officer. If deemed appropriate, I will abstain from the possession and/or consumption of alcohol.
9. I will request that my prescription medication be non-narcotic and non-addictive and notify my officer prior to consuming and/or using any prescribed medication or any over the counter medication. If my physician requires me to take any prescribed narcotic, pain, and/or potentially addictive medication, I may have to obtain a doctor's note describing my need for such treatment. I will not take anyone else's prescribed medication. I will not consume diet pills. I will not use and/or possess any other mood altering or hallucinogenic substance.
10. I will not own, use, and/or possess any type of firearm, lookalike firearm, lethal weapon, explosives, and/or ammunition. Hunting is prohibited. I will notify my officer of any firearms registered to me.
11. I understand the Adult Probation and Parole Department has the authority to search my person, place of residence, or vehicle without a warrant, if he or she has reasonable suspicion.
12. I will not operate a motor vehicle without a valid driver's license. I acknowledge that if I do, it will be a direct violation of my supervision and I am subject to being detained on a violation.
13. Other Special Conditions: _____

Initials: Client _____ A.P.O. _____

PROBATION/PAROLE AND INTERMEDIATE PUNISHMENT RIGHTS, WAIVER, AND ACKNOWLEDGEMENT:

If I violate the rules and conditions of my probation/parole and intermediate punishment or am arrested on new criminal charges, the Montgomery County Adult Probation and Parole Department has the authority to arrest me as a probation/parole/IP violator, and either remand me to Montgomery County Correctional Facility or lodge a detainer against me if I am already incarcerated, pending appropriate hearings.

At that time, I am entitled to the following rights:

1. To be notified in writing at least three days prior to a hearing of the time and place, and of the specific violation(s) charged.
2. Representation at my hearings by counsel of my own choice or if I cannot afford counsel, one will be appointed free of charge.
3. A preliminary hearing (Gagnon I) must be held before the Court to determine whether there is probable cause to believe that a violation of probation/parole/intermediate punishment has occurred. (A preliminary hearing or a waiver of this hearing at the District Court level for a new offense will satisfy this requirement.)
4. A more comprehensive revocation hearing (Gagnon II) must be held before the Court where:
 - a.) The Adult Probation and Parole Department will disclose any evidence they have to support the alleged probation/parole/intermediate punishment violations.
 - b.) I can confront adverse witness(es) (unless the Court specifically finds good cause for not allowing confrontation).
 - c.) I can present evidence and favorable witness(es) on my behalf.

If the Court decides that I have violated one or more conditions of my probation/parole/intermediate punishment, I may be committed to prison for such time as may be specified by the Court, in accordance with statutes of the Commonwealth of Pennsylvania.

I understand that if I leave the Commonwealth of Pennsylvania at any time I may be directed to return to Pennsylvania. I know that I may have a constitutional right to insist that Pennsylvania extradite me from any state where I may be found. This is commonly called the right to extradition. I also understand and acknowledge that I agree to return to Pennsylvania when ordered to do so. Therefore, I agree that I will not resist or fight any effort by any state to return me to Pennsylvania and I AGREE TO WAIVE ANY RIGHT I MAY HAVE TO EXTRADITION. I WAIVE THIS RIGHT FREELY, VOLUNTARILY AND INTELLIGENTLY.

I hereby acknowledge that I have read, or have had read to me, the foregoing conditions of my probation/parole/intermediate punishment, and that I fully understand them and agree to follow them. I fully understand the penalties involved should I, in any manner, violate them.

Furthermore, if I believe my rights have been violated or are about to be violated by an employee of the Montgomery County Adult Probation and Parole Department, I may file a written complaint to their immediate supervisor, who will investigate the complaint and respond in writing to the complainant. If I feel the need for further appeal, I am to proceed in a similar fashion according to the chain of command in the department.

Adult Probation Witness

Signature of Probationer/Parolee/IP

Date

