NO		
THE STATE OF TEXAS	§	IN THE
vs.	§	OF
	§	MEDINA COUNTY, TEXAS
FOR TH	MOTION FOR CO E PURPOSE OF DI I IN PRE-TRIAL DI	
Offense	:	
TRN: _	:TR	RS:
TO THE HONORABLE JUDGE OF S	SAID COURT:	
NOW COMES.	, the Defenda	ant in the above styled and numbered cause
along with his attorney of record,		, and the State of Texas, by and through
the undersigned Assistant Criminal	District Attorney, and	requests the court to reset this case until
show the court the following:	grounds for said reques	st, the State of Texas and the defendant would
		, SID#, and
state this is my true and complete nam		
This offense occurred within Medina C 20	ounty, Texas on or abo	out the day of
and voluntarily agree to reset my case Agreement with the State of Texas a	e for the purpose of en s represented by the M	evidence the State has against me, I knowingly itering into this Pre-Trial Diversion Program Medina County Criminal District Attorney's to the terms and conditions as listed in the
PARAGRAPH I: WAIVER	OF TRIAL RIGHTS	AND STIPULATION TO GUILT
		on Program (PTD Program), I knowingly and right to a speedy trial, and to remain silent.
		I knowingly and voluntarily admit that I an numbered cause of action (
PARAGRAPH II: RI	EPORTING AND LE	NGTH OF SUPERVISION
		months. I agree that I will be

Department, 761 Avenue Y, Hondo, Texas 78861, beginning the same day this motion is executed and filed as often as required by the 38th & 454th Judicial Districts Community Supervision and Corrections Department during the term of this Pre-Trial Diversion.

I understand that failing to meet my reporting requirements over the term of my supervision will result in my termination from the Pre-Trial Diversion Program.

PARAGRAPH III: CONDITIONS OF SUPERVISION

Upon my acceptance into the Pre-Trial Diversion Program, I agree to voluntarily and fully participate and satisfy all the terms and conditions of my supervision as determined by the Medina County Criminal District Attorney's Office and/or the 38th & 454th Judicial Districts Community Supervision and Corrections Department. I agree to refrain from disorderly conduct, abusive language or disturbing the peace while present at the office of the 38th & 454th Judicial Districts Community Supervision and Corrections Department.

I agree that during the term of Pre-Trial Diversion supervision, I will have on my person at all times a current, valid Texas Department of Public Safety photo identification card or a valid Texas Department of Public Safety photo driver's license. I further agree that during the term of Pre-Trial Diversion supervision I will not operate a motor vehicle without a valid Texas Driver's License and proof of automobile liability insurance.

I agree that I will report to, cooperate with, and participate in the following programs/services, pay all costs associated with the program/services, and submit a copy of all program completions to my supervision officer:

a.	Family Violence
b.	Anger Management Program
c.	BIPP (complete assessment and follow recommendations)
d.	Certified Drug Offender Education Class
e.	Out-Patient Substance Abuse Treatment Program and complete after care as recommended
f.	DWI Education program for first time offenders
g.	Parenting Classes
h.	Psychological or Psychiatric evaluation by a department approved provider
i.	Attend AA/NA meetings per week for weeks.
j.	Other:

I understand that failing to fully satisfy any of the terms or conditions of my supervision $\underline{\text{will}}$ result in my termination from participation in the Pre-Trial Diversion Program.

PARAGRAPH IV: FEES

I agree to pay a \$450.00 Pre-Trial Diversion District Attorney Fee upon my acceptance to the program. The fee will be paid to the 38th & 454th Judicial Districts Community Supervision and Corrections Department, and I understand this fee is **non-refundable** under any circumstances.

I agree to pay a **\$60.00** Supervision Fee to the 38th & 454th Judicial Districts Community Supervision and Corrections Department per month for each month of supervision in the Pre-Trial Diversion Program. The first month's Supervision Fee will be paid upon intake into the Pre-Trial Diversion program and each subsequent Supervision Fee will be paid by the monthly anniversary of the starting date of this Pre-Trial Diversion.

I agree to pay a CSR Insurance Fee of **\$20** to the 38th & 454th Judicial Districts Community Supervision and Corrections Department, if Community Service Restitution is required under the terms of this Pre-Trial Diversion.

I agree to pay all costs associated with urinalysis, oral or breath testing if such testing is deemed appropriate by the Medina County Criminal District Attorney's Office and/or the 38th & 454th Judicial Districts Community Supervision and Corrections Department during my period of supervision in the Pre-Trial Diversion Program as they become due.

I agree to pay restitution in the amount of \$______, up front and in full upon execution of this motion by money order or cashier's check. The money order or cashier's check will be made out to the complainant/victim and must be submitted to the Medina County Criminal District Attorney's Office.

I agree to pay the \$_____ Court Appointed Lawyer Fee if a lawyer has been appointed

by the Court to represent me in this matter. The Court Appointed Lawyer Fee is to be paid in full at least

one month prior to the end of the term of the Pre-Trial Diversion.

I agree to pay the cost of any rehabilitative programs, monitoring devices, counseling and/or classes that are assessed by the Medina County Criminal District Attorney's Office and/or the Pretrial Services Department as a condition of my participation in the Pre-Trial Diversion Program as they become due.

I understand failing to pay any of these fees, in their entirety when due, $\underline{\text{will}}$ result in my termination from the Pre-Trial Diversion Program.

PARAGRAPH V: TRAVEL / PLACE OF RESIDENCE / CHANGE OF STATUS

I agree I will maintain residence in the State of Texas during my supervision period in the Pre-Trial Diversion Program, unless a written exception has been granted by the Medina County Criminal District Attorney's Office and/or the 38th & 454th Judicial Districts Community Supervision and Corrections Department. I agree not to travel outside of the State of Texas during my period of supervision unless my supervision officer has given me permission to travel before doing so.

I agree I will continue to reside at my current place of residence, as listed previously, and to notify my supervision officer within 24 hours of any change in residence.

I agree to notify my supervision officer within 24 hours of changing my phone number.

I agree the supervision officer has my knowing and voluntary consent to conduct unannounced home visits at my place of residence as needed during my period of supervision in the Pre-Trial Diversion Program.

I agree I must satisfy all the requirements of this program within Medina County unless I have prior written permission through the 38th & 454th Judicial Districts Community Supervision and Corrections Department to do so elsewhere within the State of Texas.

I understand my participation in the Pre-Trial Diversion Program \underline{will} be terminated for failing to comply with the requirements listed in this paragraph.

PARAGRAPH VI: COMMUNITY SERVICE HOURS

I agree to complete _____ Community Service Restitution hours pursuant to this Pre-Trial Diversion. The 38th & 454th Judicial Districts Community Supervision and Corrections Department will approve where and in what manner this obligation is satisfied. I agree that I will be required to report for the Community Service Orientation Program as Directed. Furthermore, I understand and agree my participation in any class or counseling as a part of the Pre-Trial Diversion Program will not satisfy the community service requirement. I also understand I cannot purchase or 'buy out' my community service hours.

I understand that failing to complete my community service requirement \underline{will} result in my termination from the Pre-Trial Diversion Program.

PARAGRAPH VII: EMPLOYMENT, SCHOOLING

I agree to be fully employed, actively seeking full employment, enrolled in school full-time or some combination thereof during my period of supervision in the Pre-Trial Diversion Program, unless an exception is granted through by the District Attorney's Office.

I understand that failing to be fully employed, seeking full employment, enrolled in school or some combination thereof as required in the terms of my agreement with the District Attorney's Office will result in my termination from the Pre-Trial Diversion Program.

PARAGRAPH VIII: ADDITIONAL TERMS AND CONDITIONS

I agree to	o th	e following additional terms of Pre-Trial Diversion supervision:
8	a.	I will have no harmful or injurious contact with
		either in person, in writing, by phone, electronically, or through third parties.
ł	b.	I will have no contact with, either in person, in
		writing, by phone, electronically, or through third parties and stay 200 yards from where they
		live, work or any place they may be.
(c.	I will write a letter of apology to and submit it to my
		Supervision Officer by, 20
(I will not obtain or possess any firearms on my person or in my residence during the term
		of this Pre-Trial Diversion.
ϵ	e.	Other:
f	f.	Other:

I understand my participation in the Pre-Trial Diversion Program <u>will</u> be terminated for failure to comply with any of the additional terms and conditions listed in this paragraph.

PARAGRAPH IX: GROUNDS FOR TERMINATION FROM THE PRE TRIAL DIVERSION PROGRAM

I agree I will not violate the laws of this State or any other state or any provision of federal law during the period of my pre-trial supervision, excepting minor traffic violations. I understand doing so will result in my immediate termination from the Pre-Trial Diversion Program regardless of the final outcome of said violation.

I agree if I do not satisfactorily complete all listed, recommended and agreed to terms and conditions during my supervision in the Pre-Trial Diversion Program, my participation in same will be terminated and the above styled and numbered cause of action placed back on the Court's trial docket.

I agree to appear in Court when ordered to do so. Notice of my appearance may be mailed to me at the home address I provide to the 38th & 454th Judicial Districts Community Supervision and Corrections Department. I also agree and understand that if I am terminated from the Pre-Trial Diversion Program for lack of compliance with any requirement whatsoever and subsequently fail to appear when ordered to do so a warrant for my arrest can be issued.

I agree there is no appeal or review if I am terminated from the Pre-Trial Diversion Program. I understand and agree said termination is within the sole discretion of the Medina County Criminal District Attorney's Office upon violation of the terms and conditions listed herein.

I agree, if my participation in the Pre-Trial Diversion Program is terminated for any reason whatsoever, this Agreed Motion and the Stipulation of Guilt herein is admissible at trial, in its entirety, as proof of my guilt to the offense charged in the above listed and numbered cause of action.

PARAGRAPH X: SUCCESSFUL COMPLETION

The Medina County Criminal District Attorney's Office agrees, if the Defendant successfully completes the terms and conditions of this agreement, to its satisfaction, the State will move to dismiss the above styled and numbered cause. Furthermore, the State will not oppose a Petition for Expunction by the Defendant upon successful completion of the program. However, the State reserves the right to provide the Court with factual information related to the case if and/or when an expunction is sought.

PARAGRAPH XI: DEFENDANT'S ACKNOWLEDGMENT

I,	, the Defendant herein, have rea	d all of the terms and			
I,, the Defendant herein, have read all of the terms and conditions listed in the above agreement and fully understand them. I also certify that I am competent to					
nter into this agreement with the State of Texas to participate in the Pre-Trial Diversion Program, and do					
so freely, and voluntarily, after of	consulting with my attorney.				
	Defendant				
SUBSCRIBED TO AND SWOI	RN TO on this day of	, 20 .			
	Clerk/Notary				
	Medina County, Texas				

PARAGRAPH XII: DEFENSE COUNSEL ACKNOWLEDGMENT

accompanying terms and conditions. The Defendant conditions herein, the consequences of non-compliar	
Attorney for the defendant	
Thomey for the defendant	Bar No:
	Phone Number:
Agreed to, and approved by the Medina County Crin	ninal District Attorney's Office.
Attorney for the State	
Bar No:1403 Avenue N, Hondo, Texas 78861	
Phone: (830) 741-6187	