

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	JUDGMENT OF SENTENCE <input type="checkbox"/> COMMITMENT TO JAIL	CASE NO. and JUDGE
--	---	---------------------------

ORI Court address Court telephone no.

MI-
Police Report No.

THE PEOPLE OF

☐ The State of Michigan

☐ _____

v

Defendant's name, address, and telephone no.

CTN/TCN	SID	DOB
---------	-----	-----

THE COURT FINDS:

1. The defendant was found guilty on _____ of the crime(s) stated below:
Date

Count	CONVICTED BY			DISMISSED BY*	CRIME	CHARGE CODE(S) MCL citation/PACC Code
	Plea*	Court	Jury			

*Insert "G" for guilty pleas, "NC" for nolo contendere, or "MI" for guilty but mentally ill, "D" for dismissed by court, or "NP" for dismissed by prosecutor/plaintiff.

2. The defendant ☐ was represented by an attorney: _____
☐ was advised of right to counsel and appointed counsel and knowingly, intelligently, and voluntarily waived that right.

☐ 3. Conviction reportable to Secretary of State.** The defendant's driver's license number is _____.

☐ 4. Sanctions are reportable to State Police.** ☐ Revoked. ☐ Suspended _____ days. ☐ Restricted _____ days.
**(see page 2)

☐ 5. ☐ HIV testing is required and has been completed. ☐ Sex offender registration is required and has been completed.

☐ 6. The defendant has been fingerprinted according to MCL 28.243.

☐ 7. A DNA sample is already on file with the Michigan State Police from a previous case. No assessment is required.

IT IS ORDERED:

☐ 8. Probation is revoked.

☐ 9. ☐ Deferred status is revoked. ☐ HYTA status is revoked.

IT IS ORDERED (continued):

☐ 10. The defendant is sentenced to jail as follows: ☐ Report at _____
Time

Count	Date Sentence Begins	Sentenced Mos.	Sentenced Days	Credited Mos.	Credited Days	To Be Served Mos.	To Be Served Days	Release Authorized for the Following Purpose	Release Period From	Release Period To
								<input type="checkbox"/> Upon payment of fine and costs.....		
								<input type="checkbox"/> To work or seek work.....		
								<input type="checkbox"/> For attendance at school.....		
								<input type="checkbox"/> For medical treatment.....		
								<input type="checkbox"/> Other: _____		

☐ 11. Sentence(s) to be served consecutively to (If this item is not checked, the sentence is concurrent.)

☐ each other. ☐ case number(s) _____

12. The defendant shall pay:

State Minimum	Crime Victim	Restitution	DNA Assess.	Court Costs	Attorney Fees	Fine	Other Costs	Total
\$	\$	\$	\$	\$	\$	\$	\$	\$

The due date for payment is _____. Fine, costs, and fees not paid within 56 days of the due date are subject to a 20% late penalty on the amount owed. If you are not able to pay due to financial hardship, contact the court immediately to request a payment alternative. MCR 6.425(D)(3).

☐ The defendant shall serve _____ days in jail for failure to pay on time, as part of a conditional sentence. Prior to enforcement of jail time for failing to pay, the court must determine the defendant's ability to pay.

☐ 13. The defendant shall be placed on probation for _____ months and abide by the terms of probation. (See separate order.)

☐ 14. The defendant shall complete the following rehabilitative services.

☐ Alcohol Highway Safety Education ☐ Treatment (☐ outpatient, ☐ inpatient, ☐ residential, ☐ mental health).
Specify:

☐ 15. Other:

☐ 16. The vehicle used in the offense shall be immobilized or forfeited. (See separate order.)

Judge/Magistrate signature and date

**Currently convictions are reportable to the Secretary of State under:

- MCL 257.625(21)(a)
- MCL 257.732
- MCL 324.80131
- MCL 324.81134(20)
- MCL 324.82157

**Sanctions are reportable to the State Police under:

- MCL 257.625(21)(b)