IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT IN AND FOR BREVARD COUNTY, FLORIDA

| STATE OF FLORIDA, | CASE NO.: | : 052019CF024406AXXXXX |
|--|--|---|
| vs. EMILY CAROLINE HARTMAN Defendant/ | Case # 05-2019-CF-024406-AXXX-XX Document Page # 54 *33583104* | FILED IN OPEN COURT Date 6-18-31 Time 1.35 (A.M./P.M. RACHEL M. SADOFF Clerk of the Circuit and County Court |
| The undersigned defendant withdray follows: | PLEA AGREEMENT ws the previously entered plea(s) of not guilty an | Deputy Clerk nd tenders a plea of (x) guilty, () no contest as |
| Offenses charged in Information: COUNT 1: AGGRAVATED MAN COUNT 2: NEGLECT OF CHILD | NSLAUGHTER OF A CHILD (F1) 782.07(3) D WITH GREAT BODILY HARM (F2) 827. CAINE WITH INTENT TO SELL OR (1)(a)1 | |
| COUNT 4: POSSESSION OF NO CANNABIS (M1) 893. | T MORE THAN 20 GRAMS OF | 1 yr BCJ/\$1,000 |
| COUNT 2: State will nolle pr | NSLAUGHTER OF A CHILD (F1) 782.07(3) oss CAINE WITH INTENT TO SELL OR | 30 yrs DOC/\$10,000 |
| DELIVER (F2) 893.130 COUNT 4: POSSESSION OF NO CANNABIS (M1) 893. | (1)(a)1 T MORE THAN 20 GRAMS OF | 15 yrs DOC/\$10,000 1 yr BCJ/\$1,000 |
| , , | ed upon the following sentence to be imposed as | |
| and 3, concurrent DOC on Counts | Adjudication of guilt. Defendant will be set a 1 and 3, followed by 10 years drug offender pross Count 2. Special conditions as attache | probation on Count 1. Credit for time |
| S 100.00 Prosecution Costs, S 1,542.80 Investigative Costs | (Minimum of \$100 Felony/\$50 Misdemeanor) toMelbourne Police Dept | |
| I understand that if I am not a United Immigration Service. | d States Citizen, entry of this plea may subject n | ne to deportation by the United States |
| I understand that probation may be p | part of my sentence unless specifically excluded | by this agreement. |
| conditions are specifically attached l | rt of my sentence, the Court may impose conditionereto, those conditions are by this agreement le be imposed as part of my sentence unless those of | off to the discretion of the Court. I further |
| I understand that if probation is a pai imprisonment in the County Jail as a | rt of my sentence, unless excluded by this agree condition of probation or community control up | ment, the Court may impose a term of p to 364 days. |
| attendance of witnesses on my behal | olead not guilty and to be tried by a jury with the f; the right to confront and cross examine witned the stand and testify; I waive those rights by entore the stand and testify; I waive those rights by entore the stand and testify; I waive those rights by entore the stand and testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive those rights by entore the standard testify; I waive the standard testify; I waive the standard testify the standard testify the standard testify. | sses against me; the right to present defenses |
| I understand that if I enter a plea wit judgment, including the issue of guil | hout reserving the right to appeal, I will give up t or innocence, except for the limited review ava | my right to appeal all matters relating to the ailable by collateral attack. |

I understand that I may be asked questions by the Court under oath about this plea and that my answers may be used against me

I enter this plea freely and voluntarily. No person has threatened or coerced me into entering this plea. No person has made any

promises to me that induced me to enter this plea, except those matters specifically set forth in this plea agreement.

later in a prosecution for perjury.

Defendant Initials

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Plea Agreement – page 2 of 5

My lawyer has reviewed all evidence disclosed through discovery, and has discussed the nature of that evidence with me, including the existence of any physical evidence for which DNA testing might exonerate me. I am satisfied with the representation my lawyer has given me and I have fully discussed my case and the contents of this agreement with my lawyer.

There have been no promises made to me by anyone regarding how many points I will score on my sentencing scoresheet.

I have fully discussed my case with my lawyer and I am satisfied with the representation my lawyer has given me. I fully understand the nature of the charges against me.

I am in good physical and mental health and I am not under the influence of alcohol or any drug at this time.

If I plead guilty or nolo contendere, and the offense to which I am pleading is a sexually violent offense or a sexually motivated offense, or if I have been previously convicted of such an offense, the plea may subject me to involuntary civil commitment as a sexually violent predator upon completion of my prison or jail sentence. It shall not be necessary for the trial judge to determine whether the present or prior offenses were sexually motivated in this respect, as this admonition shall be given to all defendants in all cases.

I hereby waive my right to a speedy trial.

I acknowledge that, if part of this plea agreement includes my release or my continued release on recognizance, then this portion of the plea agreement is conditioned upon the following:

- (1) I must appear at the probation office at 801 Dixon Blvd., Suite 1104 Cocoa, FL 32922, (321) 634-3570, and schedule a presentence investigation not later than the first business day following the entry of my plea.
- (2) I must obey the order of the court requiring me to undergo drug or alcohol screening or for other evaluation if such an order has been made in my case.
- (3) I must appear on time for all appointments with the assigned probation officer and not be under the influence of any illegal drugs or alcohol.
- (4) I must appear in court on time for sentencing and not be under the influence of any illegal drugs or alcohol.
- (5) I must have no contact, either direct or indirect, with the victim.
- (6) I must not be arrested for a violation of any criminal law. If sufficient evidence is found to support my arrest by a preponderance of the evidence, the arrest will constitute a violation of this plea agreement. *See* Neeld v. State, 977 So.2d 740 (2008).

I realize that this agreement is subject to being accepted or rejected by the Court, and if it is rejected for any reason other than for a breach of this agreement, I may withdraw my plea and go to trial.

The following conditions shall also apply. (See Attached)

I understand and agree that if I fail to comply with any of the conditions set forth below I will have breached my plea agreement. In that event I will not be allowed to withdraw my plea and the Court may sentence me to any sentence authorized by law for the offense(s) to which I have pled, including the statutory maximum penalty for each crime to which I have pled under this document.

SWORN TO, SIGNED AND FILED IN OPEN COURT, IN MY PRESENCE

THIS _/8" DAY OF ______, 2021.

Circuit Court Judge

CERTIFICATE OF DEFENSE ATTORNEY

I certify that I have fully discussed this case and this plea agreement with the defendant including the nature of the charges, their elements, the evidence of which I am aware, including physical evidence for which DNA testing may exonerate the defendant, any possible defenses, the maximum and minimum penalties which may be imposed, the probable guideline range and the defendant's right to appeal.

Counsel for Defendant

CERTIFICATE OF PROSECUTION

The State accepts and recommends to the Court the terms of this agreement.

JULIA A. LYNCH, Assistant State Attorney

Defendant Initials

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Defendant Initials

IT IS FURTHER ORDERED that you shall comply with the following standard conditions of supervision as provided by Florida law:

- (1) You will report to the probation office as directed. Not later than the fifth day of each month, unless otherwise directed, you will make a full and truthful report to your officer on the form provided for that purpose.
- You will pay the State of Florida the amount of \$____ per month, as well as 4% surcharge, toward the cost of your supervision in accordance with s. 948.09, F.S., unless otherwise exempted in compliance with Florida Statutes.
- You will remain in a specified place. You will not change your residence or employment or leave the county of your residence without first procuring the consent of your officer.
- (4) You will not possess, carry or own any firearm. You will not possess, carry, or own any weapons without first procuring the consent of your officer.
- (5) You will live without violating the law. A conviction in a court of law shall not be necessary for such a violation to constitute a violation of your probation/community control.
- (6) You will not associate with any person engaged in any criminal activity.
- (7) You will not use intoxicants to excess or possess any drugs or narcotics unless prescribed by a physician. Nor will you visit places where intoxicants, drugs or other dangerous substances are unlawfully sold, dispensed or used.
- (8) You will work diligently at a lawful occupation, advise your employer of your probation status, and support any dependents to the best of your ability, as directed by your officer.
- (9) You will promptly and truthfully answer all inquiries directed to you by the court or the officer, and allow your officer to visit in your home, at your employment site or elsewhere, and you will comply with all instructions your officer may give you.
- (10) You will pay restitution, court costs, and/or fees in accordance with special conditions imposed or in accordance with the attached orders.
- (11) You will submit to random testing as directed by your officer or the professional staff of the treatment center where you are receiving treatment to determine the presence or use of alcohol or controlled substances.
- You will submit a DNA sample, as directed by your officer, for DNA analysis as prescribed in ss. 943.325 and 948.014, F.S.
- (13) You will report in person within 72 hours of your release from incarceration to the probation office in <u>Brevard</u> County, Florida, unless otherwise instructed by the court or department. (This condition applies only if section 3 on the previous page is checked.) Otherwise, you must report immediately to the probation office located at 801 Dixon Blvd., Suite 1104, Cocoa, FL 32922 (321) 634-3570.

SPECIAL CONDITIONS

| | 1. You must undergo a Drug and Alcohol evaluation and, if treatment is deemed necessary, you must successfully complete the treatment, and be responsible for the payment of any costs incurred while receiving said evaluation and treatment, unless waived by the court. Additional instructions ordered: |
|-------------|--|
| | 2. You will make restitution to the following victim(s), as directed by the court, until the obligation is paid in full: NAME: TOTAL AMOUNT: \$ |
| | Additional instructions ordered, including specific monthly amount, begin date, due date, or joint & several: NAME: |
| | TOTAL AMOUNT: \$ |
| | Additional instructions ordered, including specific monthly amount, begin date, due date, or joint & several: |
| \boxtimes | 3. You will be required to pay for drug testing unless exempt by the court. |
| | 4. You will enter the Department of Corrections Non-Secure Drug Treatment Program or other residential treatment program/Probation and Restitution Center for a period of successful completion as approved by your officer. You are to remain until you successfully complete said Program and Aftercare. You are to comply with all Rules and Regulations of the Program. You shall be confined in the county jail until placement in said program, and if you are confined in the jail, the Sheriff will transport you to said program. |

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| \boxtimes | 5. You will abstain entirely from the use of alcohol and/or illegal drugs, and you will not associate with anyone who is illegally using drugs or consuming alcohol. Except with Parents in their from R: | |
| \boxtimes | 6. You will submit to urinalysis testing on a random basis to determine the presence of alcohol or illegal drugs. You will be required to pay for the tests unless exempt by the court. | |
| \boxtimes | 7. You will not visit any establishment where the primary business is the sale and dispensing of alcoholic beverages. | |
| | 8. You will successfully completehours of community service at a rate of, at a work site approved by your officer. Additional instructions ordered: | |
| \boxtimes | 9. You will remain at your residence between 10 p.m. and 6 a.m. due to a curfew imposed, unless otherwise directed by the court. | |
| | 10. You will submit to electronic monitoring, follow the rules of electronic monitoring, and pay \$ per month for the cost of the electronic monitoring service. | |
| | 11. You will not associate with during the period of supervision. | |
| | 12. You will have no contact (direct or indirect) with the victim or the victim's family during the period of supervision. | |
| | 13. You will have no contact (direct or indirect) with during the period of supervision. | |
| \boxtimes | 14. You will maintain full time employment or attend school/vocational school full time or a combination of school/work during the term of your supervision. | |
| | 15. You will make a good faith effort toward completing basic or functional literacy skills or a high school equivalency diploma. | |
| | 16. You will successfully complete the Probation & Restitution Program, abiding by all rules and regulations. | |
| | 17. You will attend Alcoholics Anonymous or Narcotics Anonymous meetings at least monthly, unless otherwise directed by the court. | |
| | 18. You must successfully complete <u>Anger Management</u> , and be responsible for the payment of any costs incurred while receiving said treatment, unless waived. If convicted of a Domestic Violence offense, as defined in s. 741.28, F.S., you must attend and successfully complete a batterer's intervention program, unless otherwise directed by the court. Additional instructions ordered: | |
| | 19. You will attend an HIV/AIDS Awareness Program consisting of a class of not less than two (2) hours or more than four (4) hours in length, the cost for which will be paid by you. | |
| | 20. You shall submit your person, property, place of residence, vehicle or personal effects to a warrantless search at any time, by any probation or community control officer. | |
| | 21. If you have been found to have committed a crime on or after October 1, 2008 for the purpose of benefitting, promoting, or furthering the interests of a criminal gang, you are prohibited from knowingly associating with other criminal gang members or associates, except as authorized by law enforcement officials, prosecutorial authorities, or the court, for the purpose of aiding in the investigation of criminal activity. | |
| | 22. You will successfully complete a Post-adjudicatory treatment-based drug court program, as provided in s. 397.334(3), F.S. | |
| | 23. You will submit to electronic monitoring, follow the rules of electronic monitoring, and pay \$ per month for the cost of the electronic monitoring service. 24. Other: You shall fully cooperate with authorized officials to fulfill any registration or identification procedures authorized by law. | |

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Defendant Initials

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| • | | 25. A: You will have no unsupervised contact with a child under the age of 18 unless supervised by the child's parent or legal guardian, or by a court order > 26. |
| | | 27. |
| | | 28. Other: |
| | | COMMUNITY CONTROL & DRUG OFFENDER CONDITIONS |
| | | You will remain confined to your approved residence under house arrest except for (minutes)/(hours) before and (minutes)/(hours) after any approved employment, public service work or other special activities approved in advance by your Community Control Officer. Approval to be away from your residence will be given only for things involving necessities of life such as work, doctor and dental appointments, grocery shopping, laundry, church, etc. You will not be allowed to leave for any recreational or pleasure activities. Approval to be away from your residence must be obtained prior to leaving. If you leave without permission and then report your absence, it is still a violation. Any authorization given you to go to work, to the doctor, etc., means that you must travel directly there and directly back to your residence. You may not make any stops along the way unless approved in advance by your Community Control Officer. Your "residence" means: (a) if a house, the boundaries of your yard. You cannot go across the street or to a house next door to visit; (b) if a mobile home, the boundaries of the lot; (c) if an apartment, the boundary is the apartment walls of your apartment and any porch, portico or balcony. You may not use the amenities (swimming pool, tennis courts, etc.) nor the Laundromat in the complex without getting the prior consent of your Community Control Officer. |
| | | (BOTH-DRUG OFFENDER #32) The Court retains custody over your person and authorizes any officer to search you at any time and search all vehicles and premises concerning which you have legal standing to give consent to search. |
| | | (BOTH-DRUG OFFENDER #33) You will submit to urinalysis, breathalyzer or blood test at any time requested by your officer, or by the professional staff of any treatment center where you are receiving treatment, to determine the presence or use of alcohol or controlled substances at your expense. |
| • | | (BOTH-DRUG OFFENDER #34) You will not use or possess marijuana, cocaine, or other controlled substances of any kind (except upon prescription of a fully licensed medical doctor), nor associate with persons illegally possessing controlled substances. You will possess no controlled substances paraphernalia, such as cigarette papers, bong pipes, roach clips, hypodermics, etc. |
| | | (BOTH-DRUG OFFENDER #35) As directed by your Officer, you will enroll in, regularly attend, and successfully complete such programs as are reasonably related to your past and future criminality, or to the rehabilitative purposes of probation; including but not limited to alcohol and drug treatment and counseling, mental health counseling, vocation and educational courses, rehabilitation programs, evaluation and therapy. |
| | | (PROB-DRUG OFFENDER #14) You will participate in a specialized drug treatment program, either as an in-patient, or as recommended by the treatment provider. You will attend all counseling sessions, submit to random urinalysis and, if an in-patient, you will comply with all operating rules, regulations, and procedures of the treatment facility. You will pay for all costs associated with the treatment and testing unless otherwise directed. Additional instructions ordered: |

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