

Consecutive to Courts 1+2

COURT: West Bath

STATE OF MAINE

DOCKET NO. 00-463

STATE OF MAINE vs. Suzanne Mungo CONDITIONS OF PROBATION

Probation Term: Courts 3+4 One Year

D.O.B.: 11-15-65 S.S. # _____
You have been convicted of Tampering w/ Public Records which (is)(are)
Class B crime(s) and the court has placed you on probation and committed you to the supervision of the
Department of Corrections for the term specified above and on conditions specified below.

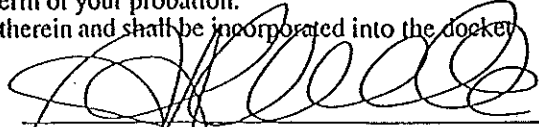
THE CONDITIONS OF YOUR PROBATION ARE AS FOLLOWS: YOU SHALL

1. refrain from all criminal conduct and violation of federal, state and local laws.
2. report to the probation officer forthwith and thereafter as the probation officer may direct, or if incarcerated, within 48 hours of release from custody.
3. answer all reasonable inquiries by the probation officer and permit the probation officer to visit you at reasonable times at your home or elsewhere.
4. notify the probation officer before changing address or employment.
5. remain within the jurisdiction of this state unless written permission is given by the probation officer for you to leave the state temporarily.
6. maintain employment and devote yourself to an approved employment/education program.
7. refrain from possession and use of any unlawful drugs and the ~~(excessive)~~ (possession or) use of intoxicating liquor.
8. identify yourself as a probationer to any law enforcement officer when arrested, detained or questioned and you shall notify your probation officer of the contact within 24 hours.
9. waive extradition to the State of Maine from any State of the United States, the District of Columbia, or any other place, to answer any charge of violating the terms of probation.
10. not own, possess or use any firearms or dangerous weapons if you have been convicted of murder, or a Class A, B or C crime, or any other matter involving the use of a firearm.
11. provide a DNA sample if directed by your probation officer and your offense is one set forth in 25 MRSA § 1574(4).
12. pay to the Department of Corrections a supervision fee of \$ 10 per month.
13. pay to the Department of Corrections an (electronic monitoring fee) (substance testing fee) of \$ 100/year.
14. not own, possess or use any firearm or dangerous weapons.
15. submit to (random) search and testing for (alcohol) (drugs) (firearms) (dangerous weapons) (upon reasonable suspicion of use or possession).
16. undergo (substance abuse) and/or (psychological) (domestic abuse) (certified batterers' intervention program) as presently undertaken counseling/treatment to the satisfaction of the probation officer; consent to the release of any counseling/treatment information to your probation officer, the district attorney and the court. You shall contribute to the cost of any counseling/treatment based on your financial ability as determined by the probation officer.
17. undergo available medical or psychiatric treatment (as an out-patient) (enter and remain as a voluntary patient), in _____
18. pay restitution (in the [maximum] amount of \$ _____) through the Department of Corrections within _____ months (on a schedule to be determined and set by the probation officer) for the benefit of _____
19. pay \$ 1180 as (fines) (surcharges) and (assessments) and (counsel fees in full) (counsel fees of \$ _____) within 6 months (on a schedule to be determined and set by the probation officer).
20. not operate or attempt to operate any motor vehicle (including ATV, motorboat or aircraft) (until properly licensed by the Secretary of State).
21. have no contact of any kind with not to be employed in any job w/ access to prescription drugs and the family of said person(s).
22. not associate with any other person who is on probation or parole without written permission of the probation officer.
23. perform _____ hours of public service work within _____ months at the direction and to the satisfaction of your probation officer.
24. not be present in an establishment that serves liquor for on premises consumption after _____
25. satisfy all requirements in the Sex Offender Registration and Notification Act.
26. Other: Surrender Nurses License to Licensing Board; Disclose these conditions of probation upon application to any health care employer

Your freedom from future arrest and punishment for these offense(s) depends upon strict observance of the conditions of probation and any additional conditions further imposed by this court during the term of your probation.

ORDERED: The conditions are made part of the judgment as if recited therein and shall be incorporated into the docket by reference.

Date: 6/6/00

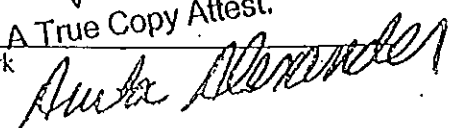

Judge/Justice

I ACKNOWLEDGE RECEIPT OF THESE CONDITIONS AND ACCEPT THEM AS WRITTEN.

WITNESS: Aunt Alexandra

PROBATIONER: Suzanne Mungo

A TRUE COPY, ATTEST:

A True Copy Attest:

Clerk