

**PALM BEACH COUNTY 15TH JUDICIAL CIRCUIT
Veteran's Court**

**DOCKET # _____
DC # _____**

**Pretrial Intervention Program
DEFERRED PROSECUTION AGREEMENT**

It is being alleged in Information # _____, that you, _____ committed an offense against the State of Florida, to-wit:_____. Having been advised of your Constitutional Rights, and it further appearing that after an investigation of the offense and into your background, the interest of the State of Florida, and your interest, will best be served by entering into this agreement;

Therefore, David Aronberg, State Attorney, in and for the Fifteenth Judicial Circuit, Palm Beach County, Florida, agrees that prosecution in this matter for said offense will be deferred for a period of months from this date, provided you abide by the following conditions:

1. You will refrain from violation of any law.
2. You will pay to the State of Florida Fifty (\$50.00) Dollars per month towards cost of your supervision unless exempted in compliance with Florida Statutes.
3. You will work regularly at a lawful occupation and support any dependents to the best of your ability.
4. You will not change your residence or employment or leave the State of Florida without first procuring the consent of your Pretrial Intervention (PTI) Officer.
5. You will make yourself available for the services of the Pretrial Program by reporting in person to your PTI Officer as directed.
6. You acknowledge that your employer must be informed of your status in the program within thirty (30) days of your acceptance or within thirty (30) days of employment, should you obtain a new position after acceptance.
7. You will neither possess nor carry any firearm or weapon.
8. You will truthfully answer all inquiries by your Pretrial Intervention Officer and agree that the officer may visit your home, employment, school or elsewhere without your prior approval and comply with all instructions he or she may give you.
9. You will not use intoxicants to excess, nor will you visit places where intoxicants, drugs or other dangerous substances are unlawfully sold, dispensed or used.
10. You will submit to a urinalysis, breathalyzer, or blood tests at any time requested by your Pretrial Intervention Officer. Should you test positive for a controlled substance, you may be required to receive a Drug Evaluation and treatment, if recommended.
11. Special Conditions: 1. Admission of guilt to the crime as charged in the Information; 2. Employer Notification; 3.

DOCKET # _____

12. The State Attorney may, during the period of Deferred Prosecution, revoke or modify the conditions of your Deferred Prosecution by:

1. Changing the period of Deferred Prosecution.
2. Prosecuting you for this offense if you violate any of these conditions.
3. Voiding this agreement should it be determined that you have a prior record of adult criminal felony convictions.

If you comply with these conditions during the period of Deferred Prosecution, no criminal prosecution concerning this charge will be instituted for the offense for which you are placed on the program.

Signing this Deferred Prosecution Agreement withdraws and/or waives your rights to a speedy trial under the Constitution and laws of Florida, and the United States of America in the cause of which prosecution is being deferred.

By: _____/_____

Assistant State Attorney Date

I hereby state that the above has been read and explained to me. I understand the conditions of my Deferred Prosecution and agree that I will comply with them.

_____/_____
Date

Defendant

_____/_____
Date

Defense Attorney

_____/_____
Date

Pretrial Officer

_____/_____
Date

Supervisor / Program Administrator

DOCKET #

MIRANDA WARNINGS

**DEPARTMENT OF CORRECTIONS
PRETRIAL INTERVENTION PROGRAM**

My name is_____. I am employed by the State of Florida, Department of Corrections as a Pretrial Officer.

You have been charged with the following offense(s):

“I am required to warn you before you make any statement that you have the following Constitutional Rights”:

- (1) You have the right to remain silent; you do not have to answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have the right to the presence and representation of a lawyer of your choice before you make any statement and during questioning.
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a Court appointed lawyer before you make any statement and during any questioning.
- (5) If at any time during the interview, you do not wish to answer any questions, you are privileged to remain silent.
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will.
- (7) Any statement can and will be used against you in a Court of Law.

Do you understand your Rights?_____

Do you have any questions? _____

I, _____ freely and voluntarily admit that I am guilty of the allegations
contained in Count(s): _____
Of Information No. _____.

Signature of Defendant

Date

Witness/Pretrial Officer

Defendant's Right Thumb Print