

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

- BANNING** 311 E. Ramsey St., Banning, CA 92220
- BLYTHE** 265 N. Broadway, Blythe, CA 92225
- INDIO** 46-200 Oasis St., Indio, CA 92201

- MURRIETA** 30755-D Auld Rd., Ste. 1226, Murrieta, CA 92563
- RIVERSIDE** 4100 Main St., Riverside, CA 92501

RI-CR077

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| <p>PEOPLE OF THE STATE OF CALIFORNIA</p> <p>vs.</p> <p>DEFENDANT:</p> | <p><i>FOR COURT USE ONLY</i></p> <hr/> <p>CASE NUMBER:</p> |
| <p>STIPULATED DISPOSITION – REQUEST TO ADD TO CALENDAR</p> | |

Attorney's Name: _____

Attorney's Phone No.: _____ Attorney's e-mail: _____

The above referenced case is being added onto the calendar for a stipulated plea/disposition. Defendant's current status: **In-custody** **Out of custody**

The following documents, if applicable, must be **fully completed and included** with this request. (*Check all that apply*)

Felonies:

- Felony Plea Form (Must include the specific counts/charges/enhancements to which the defendant is pleading or admitting and the maximum exposure time). (Must be signed by both attorneys.)
- Sentencing Memorandum/Terms and Conditions (CR002 or CR003) (Must be signed by both attorneys.)
- Program Reinstatement/Enrollment Memorandum (CR029) – for VOPs (must be signed by both attorneys.)
- Probation Department's Direct Referral form for Domestic Violence (Riverside and Southwest only)
- Probation Check-in Instructions
- Criminal Protective Orders, if needed (Must be completely filled out and reviewed for accuracy)

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| DEFENDANT: | CASE NUMBER: |
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Misdemeanors:

- Misdemeanor Plea Form (Must include the specific counts/charges/enhancements to which the defendant is pleading or admitting and the maximum exposure time.) (Must be signed by both attorneys.)
- Sentencing Memorandum/Terms and Conditions (CR002) (Must be signed by both attorneys)
- Program Reinstatement/Enrollment Memorandum (CR029) – for VOPs (Must be signed by both attorneys)
- Direct Referral form for Domestic Violence/Child Batters/Anger Management (Must be completed with all relevant dates and the correct program information.)
- Community Service Direct Referral form (All case information must be completely filled out)
- Community Service Location forms (if currently used in your location)
- Instructions to Defendant (CR010) (Must be completely filled out)
- Criminal Protective Orders, if needed (Must be completely filled out and reviewed for accuracy)

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|----------------------------|--------|
| (ATTORNEY FOR DEFENDANT) | (DATE) |
| (DEPUTY DISTRICT ATTORNEY) | (DATE) |

ORDER

Request is:

- Approved. Matter is set for hearing on _____ at _____ in Department _____ .
(DATE) (TIME)
- Denied.

Dated: _____
(JUDGE OF THE SUPERIOR COURT)