

IN THE IOWA DISTRICT COURT FOR SCOTT COUNTY

STATE OF IOWA,)	Criminal No.
)	
Plaintiff;)	
)	
vs.)	PLEA OF GUILTY
)	
_____ ,)	
)	
Defendant.)	

I, _____, state to the Court that I am charged with: _____, an aggravated/serious misdemeanor;

and that I now wish to plead guilty to that (those) charge(s). I also state I have discussed my guilty plea with my attorney; that I am satisfied with the services of my attorney; and that I have been advised and understand that:

1. When I plead guilty, I give up my right to have a jury trial on this charge.
2. When I plead guilty, I give up my right to have the opportunity to ask questions of the State's witnesses, and I also give up the right to subpoena or call my own witnesses to testify.
3. Should I have a trial, I would be entitled to have my attorney with me throughout the entire trial, and if I cannot afford an attorney, the Court would appoint one for me.
4. If I had a trial on this charge, the State would be required to prove me guilty to a jury of 12 persons, unanimously, and beyond a reasonable doubt; however, by pleading guilty I am giving up that right.
5. If I had a trial, no one could force me to testify against myself; however, I would have the right to testify on my own behalf. I give up these rights by pleading guilty.
6. By pleading guilty, I am admitting that there is a factual basis for the charge(s) and admitting that at the time and place charged in the Trial Information I _____.
7. On a plea of guilty to:

_____ O.W.I. First Offense, the Court can sentence me to jail for up to one year, with a mandatory minimum of not less than 48 hours and fine me between \$1,250.00 and \$1,875.00, plus surcharge and court costs. A substance abuse evaluation will be ordered and I must complete treatment if any is recommended.

_____ O.W.I. Second Offense, the Court can sentence me to prison not to exceed two years with a mandatory minimum jail sentence of seven days, and fine me between \$1,875.00 and \$6,250.00, plus surcharge and court costs. A substance abuse evaluation will be ordered and I must complete treatment if any is recommended.

_____ An aggravated misdemeanor, the Court can sentence me to prison not to exceed two years and fine me between \$625.00 and \$6,250.00, plus surcharge and court costs.

_____ A serious misdemeanor, the Court can sentence me to jail for up to one year, and fine me between \$315.00 and \$1,875.00, plus surcharge and court costs. If the charge is 1st offense possession of marijuana, then the maximum jail sentence is six months.

_____ A violation of Section 321J.21, the Court can sentence me to jail for up to one year and fine me between \$1,000.00 and \$1,875.00 plus surcharges and court costs.

_____ A domestic assault, the Court must impose a minimum jail sentence of two consecutive days and order me to participate in a batterer's treatment program.

_____ Possession of a controlled substance, the Court must order the Department of Transportation to revoke my operating privileges for 180 days unless judgment is deferred.

8. I understand that as a condition of my probation as set forth in by the sentencing order. If I fail to do so I may be found I contempt of court which may be punished by up to 6 months in jail and/or a fine up to \$500.00 or the previously suspended sentence could be imposed.
9. If I claim there are any irregularities or errors in the guilty plea, I must file a Motion in Arrest of Judgment not later than 45 days after this plea of guilty or in any case, not later than five days before the day of sentencing. Failure to do so will preclude my right to assert any defects in this plea in any appeal to the Iowa Supreme Court.
10. For persons who are not U.S. Citizens; I understand that a criminal conviction or deferred judgment may result in my deportation or have other adverse immigration consequences if I am not a U.S. Citizen. I have had the opportunity to discuss this with my attorney and consulate.

I further state that no one has made any promises or inducements to make me plead guilty, nor has anyone threatened me to cause me to plead guilty. The decision to plead guilty is my own voluntary decision.

I understand I must pay a fine, restitution, surcharge and costs in full as a condition of my probation. If I can't pay it immediately I will be ordered to either:

Pay \$_____ per month beginning on _____ and the _____ day of every month thereafter until it is paid in full. Failure to pay as ordered each month can result in jail, revocation, additional fees and collection procedures being initiated by the State.

And/Or pay through community service. Failure to complete the service within a reasonable time can result in jail, revocation, additional fees, and collection procedures being initiated by the State.

_____ Defendant's Initials

_____ Court Compliance

I UNDERSTAND A PLEA AGREEMENT IN MY CASE EXISTS AS EVIDENCED BY A MEMORANDUM OF PLEA AGREEMENT WHICH I HAVE SIGNED. I ALSO UNDERSTAND THAT ANY PLEA AGREEMENT IS NOT BINDING ON THE COURT. I STATE TO THE COURT I FULLY UNDERSTAND ALL MY FOREGOING RIGHTS; HEREBY GIVE UP THOSE RIGHTS; AND, THEREUPON, ENTER MY PLEA OF GUILTY TO THE CHARGES SET FORTH HEREIN.

Dated at _____, Iowa, this _____ day of _____, 201____.

_____ Defendant _____ Defendant's Address

I John O. Moeller, a regular practicing attorney at law, as an officer of the Court, state that I represent the above-named defendant; that I have advised the defendant of all his/her legal rights and obligations, defenses, and strategies with regard to the above-captioned case; and to his/her satisfaction, I have answered all questions regarding the plea of guilty. I further state that to the best of my knowledge and belief, this plea is knowingly and voluntarily and intelligently made by the defendant, and that there is a factual basis for the charge.

Dated this _____ day of _____, 201____.

Signature of Attorney