**IN THE COUNTY COURT OF THE TWENTIETH JUDICIAL CIRCUIT IN AND FOR**

**COLLIER COUNTY, FLORIDA CRIMINAL ACTION**

**STATE OF FLORIDA**

**vs. Case No:**

 **Defendant,**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/**

 PLEA IN ABSENTIA

I, **(defendant’s name),** enter a Plea of No Contest to the offense of **(charge**) as filed with the Clerk of Collier County, Florida.

My attorney, **(attorney name**), has explained the elements of the charges and the possible penalties, including the enhanced penalties for subsequent convictions if applicable, to me and I understand same. I understand that if I am charged with the same crime again in the future, I may face a greater fine, penalty, or be charged with a felony. My attorney has advised me of the substance of pre-trial discussions with the State regarding a negotiated plea. He/She has advised me of the possible results of entering this plea, including the maximum sentence which may be imposed now or upon a willful and substantial violation of probation and any mandatory sentence which must be imposed. I understand the maximum sentence is **(insert maximum sentence)**.

Pursuant to those negotiations, I enter this Plea of No Contest to the charge of **(charge)** as filed with the Clerk of Collier County, Florida. with the conditions that the following sentence will be imposed:

COUNT I

**1**. **Terms**

**2 Terms**

**3. $50.00 Cost of Prosecution**

**4. Court costs (include exact amount)**

Other than this agreement, I have received no promises of leniency or reward as an inducement to enter this Plea of No Contest.

I acknowledge that no threat, force or coercion was employed by any representative of the State of Florida, the Court or my attorney in order to induce me to enter this Plea of No Contest. This plea is being tendered by me freely and voluntarily. I know of no physical or mental disabilities which would prevent me from understanding the nature of the proceedings against me, or the Plea Agreement to which I am entering. I am not under the influence of drugs or alcohol which would impair my decision.

I have discussed with my attorney and understand the following:

a) That I have the right to be represented by an attorney at every stage of the proceeding against me and, if necessary, one will be appointed to represent me; and,

b) That I have the right to persist in my plea of not guilty and that I have the right to be tried by a jury and at that trial have the right to the assistance of counsel, the right to compel attendance of witnesses on my behalf, the right to confront and cross-examine witnesses against me, and the right not to be compelled to incriminate myself; and

c) That I am presumed innocent of this charge and the State has the burden of proving my guilt beyond a reasonable doubt; and,

d) That if I plead guilty, or nolo contendere without express reservation of right to appeal, I give up my right to appeal all matters relating to the Judgment, including the issue of guilt or innocence, but I do not impair my right to review by appropriate collateral attack.

 e) That if I plead guilty or am adjudged guilty after a plea of nolo contendere there will be no further trial of any kind, so that by pleading guilty or nolo contendere I waive the right to a trial.

f) If the offense to which I am pleading is a sexually violent offense or a sexually motivated offense, or if I have previously been convicted of such an offense, this plea may subject me to involuntary civil commitment as a sexually violent predator upon completion of my sentence.

g) Upon acceptance of my plea by a judge, I understand that unless the judge had denied a motion to dismiss or a motion to suppress which would be dispositive of my case, and I affirmatively preserve the right to appeal the denied motion(s), I waive the right to appeal. Otherwise, I understand that I have 30 days to appeal the sentence and judgment of the court.

h) I understand that if I fail to pay financial obligations ordered by the court, it shall result in a suspension of my driver’s privilege (Fla. Stat. 322.245). I understand that all unpaid financial obligations still remaining 90 days after payment is due will be referred by the Clerk of Court to a collection agency and an additional fee of up to 40% of the outstanding balance owed will be added to the total amount due. Fla. Stat. 28.246.

i) My attorney has fully advised and explained to me all deportation issues. If I am not a US citizen, entering this plea could cause me to be deported or removed pursuant to the laws and regulations governing the US Government and the Department of Immigration and Customs Enforcement. I still wish to enter this plea whether or not I am actually deported.

I agree that there exists an adequate factual basis for the charge of **(charge)** as filed with the Clerk of Collier County, Florida.

FURTHER, I agree to all the terms set forth above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Defendant: **(Defendant’s signature**)

STATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sworn to or affirmed and subscribed before me by means of [ ] physical presence or [ ] online notarization, on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by **(Defendant’s Name).**

NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Print, type, or stamp commissioned name of notary or clerk]

\_\_\_\_\_\_\_\_ Personally known

\_\_\_\_\_\_\_\_ Produced identification

Type of identification produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- |
| 1. R. Thumb------------------ | 2. R. Index------------------- | 3. R. Middle-------------------- | 4. R. Ring------------------- | 5. R. Little------------------- |
| 6. L. Thumb------------------- | 7. L. Index-------------------- | 8. L. Middle-------------------- | 9. L. Ring-------------------- | 10. L. Little-------------------- |

Fingerprints taken by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name / Agency Title or Badge Number (if applicable)

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 Signature County / Province / State where taken

 Undersigned defense counsel certifies that this Plea of No Contest has been read by the Defendant, **(Defendant’s name),** and explained to him by defense counsel, and that she believes the Defendant fully understands its terms. He/She further certifies that she has fully advised the Defendant concerning his legal and constitutional rights that are involved in this litigation, including the essential elements of the offense to which this Plea of No Contest is entered, of which the State would be required to prove beyond a reasonable doubt; also as to the maximum penalties which may be imposed. Furthermore, the undersigned certifies that this Plea has been explained to the Defendant in his native language, which is **(language)**.

Dated at Naples, Collier County, Florida, this **(date).**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name

 Attorney for Defendant

 Fla. Bar No.\_\_\_\_\_\_\_\_\_\_

 Address

 Phone Number