

32ND JUDICIAL CIRCUIT, STATE OF MISSOURI
COUNTY OF CAPE GIRARDEAU

STATE OF MISSOURI,)
)
Plaintiff,)
) Case No. _____
vs.)
) Phone: _____
)
) DOB: _____
)
) SSN: _____
Defendant.

PETITION TO ENTER PLEA OF GUILTY

The defendant represents to the Court:

1. My full true name is: _____. I have not gone by any other name(s) except: _____. I am _____ years of age. I have gone to school up to and including the _____ grade.

2. I am represented by an attorney. His/her name is _____.

3. I received a copy of the information (charge against me). I read the information and have discussed it with my attorney. I fully understand every charge made against me.

4. I told my lawyer all the facts and circumstances known to me about the charge(s) made against me in the information. I believe that my lawyer is fully informed on all such matters.

5. I know that the Court must be satisfied that there is a factual basis for a **PLEA OF GUILTY** before my plea can be accepted. I represent to the Court that I did the following acts in connection with the charges made against me:

(In the above space the Defendant must set out in detail what he/she did. If more space is needed, add a separate page.)

6. My attorney has counseled and advised with me on the nature of each charge, on all lesser-included charges, if any, and on all possible defenses that I might have in this case.

7. I know that I may plead NOT GUILTY to any offense charged against me. If I plead NOT GUILTY, the Constitution guarantees me, among other possible rights, (a) the right to a speedy and public trial by jury; (b) the right to see and hear all witnesses called to testify against me and to cross-examine all witness; (c) the right to use the power and process of the Court to compel the production of any evidence, including the attendance of any witnesses in my favor; (d) the right to have the assistance of an attorney at all stages of the proceedings; and (e) the right to take the witness stand at my sole option; and, if I do not take the witness stand, no inference of guilt may be drawn from such failure. If I plead GUILTY, I waive (give up) all these rights.

Defendant

Attorney for Defendant

8. I know that if I plead GUILTY, there will be no trial either before a Court or jury, and the Court may impose the same punishment as if I had pleaded NOT GUILTY, stood trial and been convicted by a jury.

9. I know that in a trial the State of Missouri must prove me guilty beyond a reasonable doubt and to the satisfaction of the jury and that all twelve (12) jurors must vote to convict me in order for me to be found GUILTY.

10. I know that I may be entitled to take this case out of this County and have it tried before a jury in some other County; also I know that I may be entitled to disqualify the regular Judge of this Court and request the Supreme Court of Missouri to designate a Special Judge to hear my case or accept my plea.

11. My attorney informed me that the range of punishment which the law provides on each count which is _____ to _____ years imprisonment, or _____ to _____ months in the County Jail, or fine not exceeding \$ _____ or both the fine and confinement in jail.

12. If I am on probation or parole in this or any other Court, I know that by pleading GUILTY here, my probation or parole may be revoked, and I may be required to serve time in that case, which may be consecutive, that is, in addition to any sentence imposed upon me in this case.

13. I declare that no officer or agent of any branch of government (federal, state or local) has promised or suggested that I will receive a lighter sentence, or probation, or any other form of leniency if I plead GUILTY, except as follows:

The Prosecuting Attorney promised that if I plead GUILTY, he/she will do the following:

(Here insert any promises or concessions made to the Defendant or to his attorney. If none, insert: "No promises or concessions made to me or to my attorney.")

If anyone else made any promises or suggestions, except as noted in the previous sentences, I know that he had no authority to do it. I know that the sentence I will receive is solely a matter within the control of the Judge. I hope to receive leniency, but I am prepared to accept any punishment permitted by law which the Court sees fit to impose. However, I respectfully request the Court to consider, in mitigation of punishment, that I have voluntarily entered a PLEA OF GUILTY.

14. Neither I, nor any of my friends or loved ones, has been mistreated, threatened, coerced, or forced in any manner by anyone to get me to plead guilty, nor were there any promises, inducements, or representations made except as set forth in paragraph 13 above.

15. I believe that my attorney has done all that anyone could do to counsel and assist me, and I AM SATISFIED WITH THE ADVICE AND HELP HE/SHE HAS GIVEN ME.

Defendant

Attorney for Defendant

16. I know that the Court will not permit anyone to plead GUILTY who maintains he/she is entirely innocent, and with that in mind, and because I AM GUILTY and do not believe that I could be found innocent by a jury, I wish to plead GUILTY and respectfully request the Court to accept my PLEA OF GUILTY.

17. My mind is clear, and I am not mentally ill. I am not under the influence of alcohol or drugs, and I am not under a doctor's care. The only drugs, medicines or pills that I took within the past seven (7) days are:

(If none, so state.)

18. If applicable, I do not have any complaints against any law enforcement officials concerning my treatment while in jail. I had sufficient food, water, medical care and bedding, and I was not mistreated by any inmate while in jail. There are no exceptions to any of these statements, except:

(If none, so state.)

19. I am a member of or licensed by one of the following professions in Missouri:

- | | |
|---|---|
| <input type="checkbox"/> Missouri State Board of Accountancy | <input type="checkbox"/> Office of Health Care Providers |
| <input type="checkbox"/> Missouri Board of Architects | <input type="checkbox"/> Office of Athletics |
| <input type="checkbox"/> Professional Engineers & Land Surveyors | <input type="checkbox"/> Landscape Architectural Council |
| <input type="checkbox"/> Council for Hearing Aid Dealers & Fitters | <input type="checkbox"/> State Board of Nursing |
| <input type="checkbox"/> Missouri Barber Board | <input type="checkbox"/> Missouri Board of Pharmacy |
| <input type="checkbox"/> State Board of Chiropractic Examiners | <input type="checkbox"/> Committee for Professional Counselors |
| <input type="checkbox"/> State Board of Cosmetology | <input type="checkbox"/> State Committee of Psychologists |
| <input type="checkbox"/> Missouri Real Estate Appraisers Commission | <input type="checkbox"/> Missouri Dental Board |
| <input type="checkbox"/> State Board of Embalmers & Funeral Directors | <input type="checkbox"/> Missouri Real Estate Commission |
| <input type="checkbox"/> State Board of Podiatry | <input type="checkbox"/> Office of Employment Agencies |
| <input type="checkbox"/> State Board of Optometry | <input type="checkbox"/> Missouri Veterinary Medical Board |
| <input type="checkbox"/> Advisory Committee for License Clinical Social Workers | <input type="checkbox"/> State Board for Registration of Healing Arts |

20. I understand that if I am not a citizen of the United States, a plea of guilty to the crime with which I am charged might result in deportation from, exclusion from, or admission to the United States and/or denial of naturalization as a US citizen, pursuant to the laws and regulations concerning the United States Immigration and Naturalization Service.

21. I OFFER MY PLEA OF GUILTY FREELY AND VOLUNTARILY AND OF MY OWN ACCORD
AND WITH FULL UNDERSTANDING OF ALL THE MATTERS SET FORTH IN THE INFORMATION
AND IN THIS PETITION AND EVERYTHING STATED HEREIN IS TRUE.

22. I have read, and my attorney has explained to me, this Petition to Enter Plea of Guilty, and each of these pages were signed by me in open Court in the presence of my attorney this _____ day of

_____, _____.

Defendant

Attorney for Defendant

CERTIFICATE OF COUNSEL

The undersigned, as attorney for the Defendant, _____, hereby certifies:

1. I have read and fully explained to the Defendant the allegations contained in the information in this case.

2. To the best of my knowledge and belief the statements, representations, and declarations made by the Defendant in the foregoing Petition are in all respects accurate and true.

3. I explained the range of punishment for each count to the Defendant.

4. The PLEA OF GUILTY offered by the Defendant in paragraph 16 accords with my understanding of the facts he/she related to me and is consistent with my advice to the Defendant.

5. I have investigated the circumstances of this case and have explored all avenues leading to facts relevant to guilt and degree of guilt or penalty. I have made efforts to secure information in the possession of the prosecution and law enforcement authorities.

6. In my opinion the PLEA OF GUILTY offered by the Defendant in paragraph 16 of the Petition is voluntarily and understandingly made. I recommend that the Court accept the PLEA OF GUILTY.

Each of these pages were signed by me in open Court in the presence of the Defendant above named and after full discussion of the contents of this certificate with the Defendant, this _____ day of _____, _____.

Attorney for Defendant

Defendant

Attorney for Defendant