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STATE OF FLORIDA, -vs - STEPHEN PETER SATHER, Defendant  
in the CIRCUIT Court of VOLUSIA County, Florida Case No. 92-33720

**ORDER OF COMMUNITY CONTROL**

This cause coming on this day to be heard before me, and you, the defendant,  
STEPHEN PETER SATHER, being now present before me, and you having

(check one)

- entered a plea of guilty to
- entered a plea of nolo contendere to
- been found guilty by jury verdict of
- been found guilty by the court trying the case without a jury of

the offense(s) of UNLAWFUL SALE OR DELIVERY OF A CONTROLLED SUBSTANCE (COCAINE), A LESSER INCLUDED OFFENSE, A SECOND DEGREE FELONY

CLERK OF THE CIRCUIT  
& COUNTY VOLUSIA, FLA.  
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*Handwritten signature*

**SECTION 1: Judgement of Guilt**

The Court hereby adjudges you to be guilty of the above offense(s).  
Now, therefore, it is ordered and adjudged that you be placed on community control for a period of \_\_\_\_\_ under the supervision of the Department of Corrections, subject to Florida law.

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**SECTION 2: Order Withholding Adjudication**

Now, therefore, it is ordered and adjudged that the adjudication of guilt is hereby withheld and that you be placed on community control for a period of TWO (2) YEARS FOLLOWED BY TWO (2) YEARS PROBATION under the supervision of the Department of Corrections, subject to Florida law.

**SECTION 3: Community Control During Portion of Sentence**

It is hereby ordered and adjudged that you be  
 committed to the Department of Corrections  
 confined in the County Jail for a term of \_\_\_\_\_ with credit for \_\_\_\_\_ jail time. After you have served \_\_\_\_\_ of the term, you shall be placed on community control for a period of \_\_\_\_\_ under the supervision of the Department of Corrections, subject to Florida law.  
 confined in the County Jail for a term of \_\_\_\_\_ with credit for \_\_\_\_\_ jail time, as a special condition of community control.

felony Dept

It is further ordered that you shall comply with the following conditions of community control during the community control period.

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- ( 1 ) Not later than the 5th day of each month, you will make a truthful report to your officer on the form provided for that purpose.
- ( 2 ) You will pay the State of Florida the amount of \$50.00 per month toward the cost of supervision, unless otherwise waived in compliance with Florida Statutes, plus a 4% administrative processing fee in accordance with Florida Statute 945.31.
- ( 3 ) You will not change your residence or employment or leave the county of your residence without first procuring the consent of your officer.
- ( 4 ) You will not possess, carry or own any firearm. You will not possess, carry or own other weapons without first procuring the consent of your officer.
- ( 5 ) You will live without violating the law. A conviction in a court of law shall not be necessary for such a violation to constitute a violation of your community control.
- ( 6 ) You will not associate with any person engaged in any criminal activity.
- ( 7 ) You will not use intoxicants to excess or possess any drugs or narcotics unless prescribed by a physician. Nor will you visit places where intoxicants, drugs or other dangerous substances are unlawfully sold, dispensed or used.
- ( 8 ) You will work diligently at a lawful occupation, advise your employer of your community control status and support any dependants to the best of your ability as directed by your officer.
- ( 9 ) You will promptly and truthfully answer all inquiries directed to you by the court or your officer and allow your officer to visit in your home, at your employment site or elsewhere, and you will comply with all instructions your officer may give you.
- (10) You will report to your officer at least four times a week, or, if unemployed full time, daily.
- (11) You will perform 0 hours of public service work as directed by your officer.
- (12) You will remain confined to your approved residence except for one half hour before and after your approved employment, public service work, or any other special activities approved by your officer.
- (13) You will pay restitution, costs and/or fees in accordance with the attached order.
- (14) You will report in person within 24 hours of your release from confinement to the probation office in Volusia County, Florida, unless otherwise instructed by your officer. (This condition applies only if section 3 on the previous page is checked.) Otherwise, you must report immediately to the probation office located at 665-G Beville Road, South Daytona, Florida.

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- (15) You will submit to urinalysis, breathalyzer or blood tests at any time requested by your officer, or the professional staff of any treatment center where you are receiving treatment, to determine possible use of alcohol, drugs or controlled substances. You shall be required to pay for such tests unless payment is waived by your officer.
- (16) Florida Statute 948.03 specifies that the Department of Corrections may, at its discretion, place you on Electronic Monitoring during your term of Community Control. If placed on Electronic Monitoring, you will wear the wristlet or anklet at all times. You will maintain a private phone and electrical service to your residence and will be financially responsible to the Department of Corrections for any lost or damaged equipment. You will pay an Electronic Monitoring fee of \$30.00 per month to the Department of Corrections while on Electronic Monitoring unless waived in accordance with Florida Statutes.

**\* \* SPECIAL CONDITIONS \* \***

- (17) You will pay to First Step of Volusia County, Inc., P.O. Box 9394, Daytona Beach, Florida, 32120 the sum of One Dollar (\$1.00) per month for each month of supervision ordered, on or before ninety days from the date of this order.
- (18) You shall pay to Clerk of the Circuit Court, P.O. Box 43, Deland, FL 32721, a total of \$255.00, which represent court cost, fines and fees, as directed by your probation officer.
- (19) You shall pay a State Attorney's Fee to The Office of the State Attorney, 7th Circuit, 251 North Ridgewood Avenue, Daytona Beach, Florida 32114-7505, Attention: Kim Ritz, Auditor, in the amount of \$250.00 as directed by your officer.
- (20) You shall pay a fee in the amount of \$250.00 to NEW SMYRNA BEACH POLICE DEPARTMENT, 210 SAMS AVENUE, NEW SMYRNA BEACH, FLORIDA 32168 with a check or money order to be made payable to: CITY OF NEW SMYRNA BEACH, attention: CHIEF OF POLICE as per Florida Statute 939.01 for reimbursement of investigative funds as directed by your officer.
- (21) You must enter and successfully complete outpatient and/or inpatient Substance Abuse Counseling as directed by your Community Control Officer and you will pay any summary fees for evaluation, referral and monitoring services. MUST BE EVALUATED.

Defendant STEPHEN PETER SATHER

Case Number 92-33720

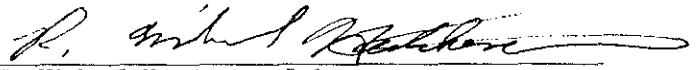
You are hereby placed on notice that the Court may at any time rescind or modify any of the conditions of your community control, or may extend the period of community control as authorized by law, or may discharge you from further supervision or return you to a program of regular probation supervision; and if you violate any of the conditions and sanctions of your community control, you may be arrested and the Court may revoke your community control and impose any sentence which it might have imposed before placing you on a community control.

It is further ordered that when you have reported to the Community Control Officer and have been instructed as to the conditions of community control you shall be released from custody if you are in custody and if you are at liberty on bond, the sureties thereon shall stand discharged from liability.

It is further ordered that the Clerk of this Court file this order in his office, record the same in the Minutes of the Court, and forthwith provide certified copies of same to the Community Control Officer for use in compliance with the requirements of law.

DONE AND ORDERED IN OPEN COURT, this the 6 day of Nov., 1992.

(nunc pro tunc 10/16/92)

  
R. Michael Hutcheson, Judge

CLERK OF THE COURT IS DIRECTED TO DELIVER A CERTIFIED COPY OF THIS ORDER TO:  
Booking Desk, Volusia County Jail                      Becky Heurman, VCSO

I acknowledge receipt of a certified copy of this order. The conditions have been explained to me and I agree to abide by them.

Date: \_\_\_\_\_ (Community Controlee)

Instructed by: \_\_\_\_\_

Original: Court  
Copies: Community Controlee, File  
Revised 7/91 ar

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