

IN THE CIRCUIT COURT, SEVENTH
JUDICIAL CIRCUIT, IN AND FOR
FLAGLER COUNTY, FLORIDA

STATE OF FLORIDA

CASE NO. 06-034-CFFA

vs.

RICHARD DUNN,

Defendant.

ORDER GRANTING CONDITIONAL RELEASE

THIS CAUSE having come before the Court for a hearing on the issue of conditional release for the Defendant, pursuant to Florida Rule of Criminal Procedure 3.219, and the Court having received evidence and heard arguments of counsel, it is hereby

ORDERED AND ADJUDGED as follows:

1. The Defendant, Richard Dunn, no longer meets the criteria for involuntary commitment and shall be released to a representative of SMA Behavioral Healthcare for transport to his placement.
2. The Defendant, Richard Dunn, is granted conditional release status and is ordered to live at Free Spirit Transitional Housing, 126 Marion Street, Daytona Beach; Ruth Plummer, Director (386) 244-0883.
3. The Defendant, Richard Dunn, has been made aware of the general and specific conditions in the attached Conditional Release Plan, and he shall abide by all those conditions.
4. Stewart Marchman Act Behavioral Healthcare is directed to submit reports every month to the Court regarding the Defendant's compliance with the conditions of his release and his progress in treatment. Stewart Marchman Act Behavioral Healthcare shall provide copies of said reports to the parties listed below.

2019 APR 23 AM 9:07
79
100
FLAGLER COUNTY, FLORIDA

5. Stewart Marchman Act Behavioral Healthcare is further directed to notify this Court promptly if the Defendant, Richard Dunn, leaves Free Spirit Transitional House to live elsewhere without Court authorization.

6. The Defendant, Richard Dunn, is to have no contact, directly or indirectly, with any of the following individuals or their immediate families:

a. Robert Dunn, (brother of the Defendant and son of the victim), Sally Dunn (wife of Robert Dunn), and their children;

b. Russ Collier, Sally Dunn's brother;

c. Lynor Camp;

d. Mike Flank (resident of 18 Clarendon Ct. South, Palm Coast, 32137, where the offense in this occurred).

7. The Defendant, Richard Dunn, is not to enter the County of Flagler without written permission from the judge who maintains jurisdiction over the case.

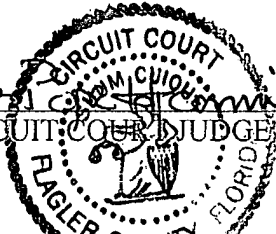
8. The Defendant, Richard Dunn, is subject to an electronic or GPS ankle monitoring devise for six months and until such time as the Court holds a hearing to consider continuation of this condition.

8
DONE AND ORDERED in Chamber this 17th day of July, 2012.

Copies furnished to:

Ms. Sally Cunningham
1317 Winewood Boulevard
Building 6, Room 224
Tallahassee, Florida 32399-0700

Ben Fox
Assistant State Attorney
1769 East Moody Boulevard
Bunnell, Florida 32114


CIRCUIT COURT JUDGE
H. POPE HAMRICK JR.
SENIOR JUDGE

JUL 18 2012

SIGNED AND DATED

Conditional Release Plan

for

Richard Dunn

Case Number: 06-00034-CFA

Date Plan Submitted: 7/17/12

TO: Honorable Raul A. Zambrano of the Seventh Judicial Circuit Court in and for Flagler County, Florida

General Conditions:

I, Richard Dunn, understand that I have been found by the Court to be NGI pursuant to Chapter 916, F.S. and that I am being considered for Conditional Release status. I understand that I will be expected to follow the conditions listed below in order to remain living in the community. I specifically agree:

- 1) To obey all municipal, state, and federal laws.
- 2) Not enter Flagler County without written permission from the judge who maintains jurisdiction over my case.
- 3) To live at Free Spirit Transitional House, 126 Marion Street, Daytona Beach, FL 32114 and abide by the rules of the home as managed by Ruth Plummer at (386) 244-0883. I agree not to change my address/living situation without prior approval of my assigned Case Manager, or written approval from the judge who maintains jurisdiction over my case.
- 4) Not to own, possess, use, or have access to firearms or any other illegal weapons of any kind.
- 5) To provide any release of information requested by my treating physician, case manager, Forensic Specialist, or other treatment staff concerning my mental health and compliance with the conditions of this Conditional Release Plan.
- 6) Not to take or possess any illegal drugs or prescribed medications unless prescribed by my treating physician.
- 7) To follow the terms of my treatment plan, whether or not they are specified in this Conditional Release Plan.
- 8) To complete any necessary forms for payment of services.

- 9) To understand that, even though I may not have violated any Conditions of Release, I may be re-hospitalized or placed in a crisis stabilization facility if my mental health deteriorates to such a point that hospitalization or stabilization is necessary for my safety and/or the safety of the community.

Specific Conditions:

I Agree:

- 1) Not to consume alcoholic beverages or use illegal substances of any kind.
- 2) To meet with my assigned case manager as required for the purpose of monitoring compliance with the Conditions of Release. These meetings may include scheduled office visits or scheduled and/or random home visits.
- 3) To take all medications as prescribed by my treating psychiatrist. I agree to meet with my treating psychiatrist as scheduled for the purpose of monitoring my medication.
- 4) I am subject to an electronic or GPS ankle monitoring device for six months and until such time as the Court holds a hearing to consider continuation of this condition.
- 5) To cooperate with the collection of laboratory specimens including testing of blood, breath, or urine for alcohol, illicit drugs, and therapeutic medication levels. I understand that some of these requests may be random and unscheduled.
- 6) To attend Alcoholics Anonymous and/or Narcotics Anonymous meetings the number of times per week as directed by my Case Manager and to provide my Case Manager with proof of attendance.
- 7) To meet with a Stewart-Marchman-Act or privately selected Mental Health/Substance Abuse Counselor as scheduled by my Case Manager.
- 8) To cooperate with all requests for Psychological Testing.
- 9) To comply with any other special conditions deemed necessary by the mental health staff responsible for my treatment.

10) That if I am unable to attend a meeting or session as required by this Conditional Release Plan, I will provide advance notice by telephoning the person with whom I was scheduled to meet. If I am unable to contact this person, I will call one of the two following individuals:

11) Alternative Contact #1: Crystal Cross, Forensic Case Manager
Telephone Numbers: (386) 236-1745

12) Alternative Contact #2: Jim Cain, Forensic Team Leader
Telephone Numbers: (386) 236-3185

13) To make arrangement for my transportation between my residence and meetings, appointments and activities and/or attend all meetings, appointments and activities as required by this Plan. I understand that missing meetings, appointments and activities because of a lack of transportation will not be accepted as an excuse.

Individual Agreement:

I have read or had read to me and understand and accept the conditions under which I will be released by the Court. I agree to abide and conform to them and fully understand that my failure to do so may result in:

- a) Revocation of Conditional Release;
- b) Modification of the Conditional Release Plan;
- c) Notification of the Court and proper legal authorities;
- d) Emergency hospitalization, pursuant to Chapter 916, F.S.; and,
- e) Arrest and prosecution.

Individual: _____ Date: _____

Forensic Team Leader: _____ Date: _____

Michael H. Lambert, Esquire
428 North Halifax Avenue
Daytona Beach, Florida 32118

Jim Cain, Forensic Team Leader
SMA Behavioral Healthcare
1150 Red John Road
Daytona Beach, Florida 32124