

CASE NO: 16-726 CFFA 16-1124 MM
 STATE OF FLORIDA
 VS

CIRCUIT COURT ACTION FORM
 FELONY DIVISION
 DATE: 10/21/16

MONIQUE GARCIA
 DEFENSE ATTY: Miller
 BONDSMAN: Jail
 JUDGE: MF
 ASA: M. Lewis

APPEAR	COURT EVENT	SPEC. COND.	REMARKS
<input checked="" type="checkbox"/> DEF. <input checked="" type="checkbox"/> P.D. <input checked="" type="checkbox"/> ATTY <input type="checkbox"/> FTA <input checked="" type="checkbox"/> JAIL	<input type="checkbox"/> CONT'D <input type="checkbox"/> PSI <input type="checkbox"/> SS ORD <input type="checkbox"/> PD APPT'D <input type="checkbox"/> BOND SET @ \$ <input checked="" type="checkbox"/> PLEA ACCT'D <input checked="" type="checkbox"/> EA. CONCURR <input type="checkbox"/> EA. CONSEC <input type="checkbox"/> WFA/WST <input type="checkbox"/> CAPIAS ISS'D <input type="checkbox"/> BOND EST	<input checked="" type="checkbox"/> DRUG OFF. <input type="checkbox"/> SEX OFF. <input type="checkbox"/> HABIT OFF <input type="checkbox"/> ANGER CONTRL <input type="checkbox"/> NO CONTACT W/ <input type="checkbox"/> SEX PRED <input type="checkbox"/> EVAL/TX <input type="checkbox"/> RES. JURIS <input type="checkbox"/> RESITIT.	<input type="checkbox"/> RIGHT TO APPEAL FCSO 418/100/150

CT	CHARGE	PLEA	ACTION/ADJ	SENTENCE
1	Impaired Exhibition of Dangerous Weapons	<input type="checkbox"/> N/G <input type="checkbox"/> GUILTY <input checked="" type="checkbox"/> NOLO <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY	<input type="checkbox"/> VERDICT <input type="checkbox"/> DISMISS <input checked="" type="checkbox"/> ADJ GUILTY <input type="checkbox"/> ADJ W/H <input type="checkbox"/> NO INFO-N/P	<input type="checkbox"/> ST. COND <input type="checkbox"/> CREDIT T/S <input type="checkbox"/> PTI <input type="checkbox"/> DRUG CT <input type="checkbox"/> PROB <input type="checkbox"/> C/CNTL <input type="checkbox"/> D/C <input checked="" type="checkbox"/> T/S FOLLOWED BY CTS# 38 days
2	Introduction of contraband into Penal Institution	<input type="checkbox"/> N/G <input type="checkbox"/> GUILTY <input checked="" type="checkbox"/> NOLO <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY	<input type="checkbox"/> VERDICT <input type="checkbox"/> DISMISS <input checked="" type="checkbox"/> ADJ GUILTY <input type="checkbox"/> ADJ W/H <input type="checkbox"/> NO INFO-N/P	<input type="checkbox"/> ST. COND <input type="checkbox"/> CREDIT T/S <input type="checkbox"/> PTI <input type="checkbox"/> DRUG CT <input type="checkbox"/> PROB <input type="checkbox"/> C/CNTL <input type="checkbox"/> D/C <input type="checkbox"/> T/S FOLLOWED BY NO VIOLENT CONTACT 24 MTH w/ victim
16-1124 MM	Domestic Battery	<input type="checkbox"/> N/G <input type="checkbox"/> GUILTY <input checked="" type="checkbox"/> NOLO <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY	<input type="checkbox"/> VERDICT <input type="checkbox"/> DISMISS <input checked="" type="checkbox"/> ADJ GUILTY <input type="checkbox"/> ADJ W/H <input type="checkbox"/> NO INFO-N/P	<input type="checkbox"/> ST. COND <input type="checkbox"/> CREDIT T/S <input type="checkbox"/> PTI <input type="checkbox"/> DRUG CT <input type="checkbox"/> PROB <input type="checkbox"/> C/CNTL <input type="checkbox"/> D/C <input checked="" type="checkbox"/> T/S FOLLOWED BY 575/50/50 180 days to set payment on days CTS# 38 days

ATTENTION: PERSONS WITH DISABILITIES
 If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Court Administration, 125 E Orange Ave, Ste 300, Daytona Bch, FL 32114, 386-257-6096, within 2 days of your receipt of this Notice. If you are hearing impaired, please call (800) 955-8771; if you are voice impaired, call 1-800-955-8770. This is not a court information line.

THIS CASE IS SET FOR:
 ARR PT/DS TRIAL OTHER HEARING AT M. ON
 ARR PT/DS TRIAL OTHER HEARING AT M. ON

YOU ARE HEREBY COMMANDED TO APPEAR BEFORE THE COURT ON THE ABOVE DATE.

DEFENDANT: _____ ATTORNEY: *R. S. Smith* CIRCUIT JUDGE DEPUTY CLERK: _____

ADDITIONAL COMMENTS