

Sentence: Count No. _____

- Imposed Stayed Withheld
- Prison: _____
 Credit for time served _____ days
- County jail: _____
beginning _____, _____ am/pm.
 With Huber Transfer authorized
 Credit for time served _____ days.
- Restitution & sur. \$ _____ To be determined
to be paid by _____.
- DL Suspended/revoked
- Probation _____ with conditions:
 County jail: _____ Work release
beginning _____, _____ am/pm.
 Community service: _____
 Employment/GED AODA treatment, counseling
 No contact: _____
 No alcohol or drug abuse

- Fine/costs/assess. \$ _____
- Attorney fees \$ _____
- Victim/witness sur. \$ _____
- Domestic abuse sur. \$ _____
- Driver imp. sur. \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- Total** \$ _____
- To be paid in _____ days or _____ days in jail.

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