

**Circuit Court Event Form SAO: MARTIN, GLENN** ✓

STATE OF FLORIDA  
VS  
REEVES, CURTIS ✓

Case 2014CF000216AXES  
No(s): \_\_\_\_\_

Court Date: 03/03/2017

Defense Attorney: ESCOBAR, RICHARD ✓

Hearing Type: STAND YOUR GROUND MTN/PTC

Charges(s): MURD IN THE 2ND DEG, 1F (PBL); AGG BATT, 2F  
Lesser(s): \_\_\_\_\_

F.S.  
 Victim Present  
 Interpreter Present  
 Speedy Trial Waived

Court Reporter: Eannel, Charlene  Digital Clerk: Bungos

Next Court Date: STC set 3/30/17 @ 9 am.

Motion to Continue By:  Defense  SAO Motion:  Granted  Denied

<p><b>Court Appointed:</b></p> <input type="checkbox"/> PD <input type="checkbox"/> RC <input type="checkbox"/> Conflict <input type="checkbox"/> HSNR <input type="checkbox"/> Failed To Appear <input type="checkbox"/> Estreat Bond <input type="checkbox"/> Surety <input type="checkbox"/> Cash <input type="checkbox"/> Revoke ROR <input type="checkbox"/> Issued Capias Amount: \$ _____ Count(s) _____ Amount: \$ _____ Count(s) _____ <input type="checkbox"/> Recall Capias <input type="checkbox"/> Reinstate ROR <input type="checkbox"/> Reinstate Bond <input type="checkbox"/> Surety <input type="checkbox"/> Cash	<p><b>Plea of:</b></p> <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Contest <input type="checkbox"/> Admit to VOP <input type="checkbox"/> VOP dismissed <input type="checkbox"/> Viol. Cond(s): <input checked="" type="checkbox"/> Evidence Received	<p><b>Verdict Of:</b></p> <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> By court <input type="checkbox"/> By jury	<p><b>Motion for:</b> stand your ground mtn</p> <input type="checkbox"/> Granted <input type="checkbox"/> w/ Prejudice <input type="checkbox"/> Denied <input type="checkbox"/> w/o Prejudice <input checked="" type="checkbox"/> Take Under Advisement <input type="checkbox"/> Withdrawn <input type="checkbox"/> No Action	<p><b>To Prep Order:</b></p> <input type="checkbox"/> Court <input type="checkbox"/> SAO <input type="checkbox"/> Defense Atty <input type="checkbox"/> Clerk <input type="checkbox"/> Filed Open Court <input type="checkbox"/> Signed Open Court
<p><b>Adjudication:</b> <input type="checkbox"/> Guilty _____ Count(s) <input type="checkbox"/> Withheld _____ Count(s) <input type="checkbox"/> Departure  <input type="checkbox"/> YO <input type="checkbox"/> HVO <input type="checkbox"/> PRR <input type="checkbox"/> Waive PRR <input type="checkbox"/> Min/Man _____ yr(s) as to count(s) _____  <input type="checkbox"/> VOP <input type="checkbox"/> Reinstate <input type="checkbox"/> Modify <input type="checkbox"/> New term <input type="checkbox"/> Revoke and Term  <b>Sentenced To:</b> _____ <input type="checkbox"/> PCDC <input type="checkbox"/> DOC <input type="checkbox"/> as to count(s) _____  <input type="checkbox"/> time served as to count(s) _____ <input type="checkbox"/> Credit T/S: _____ days  <input type="checkbox"/> _____ mos / yr(s) <input type="checkbox"/> CC <input type="checkbox"/> Prob. <input type="checkbox"/> DOPO <input type="checkbox"/> Sex Off. <input type="checkbox"/> MM <input type="checkbox"/> as to count(s) _____              As to count (s) _____ <input type="checkbox"/> Concur. <input type="checkbox"/> Consec.  <input type="checkbox"/> _____ mos / yr(s) <input type="checkbox"/> DOC <input type="checkbox"/> PCDC <input type="checkbox"/> CC <input type="checkbox"/> Prob. <input type="checkbox"/> DOPO <input type="checkbox"/> Sex Off. <input type="checkbox"/> MM  <input type="checkbox"/> F/B: _____ mos / yr(s) <input type="checkbox"/> CC <input type="checkbox"/> Prob. <input type="checkbox"/> DOPO <input type="checkbox"/> Sex Off.  <input type="checkbox"/> Concur. <input type="checkbox"/> Consec. <input type="checkbox"/> Co-Term: w/ <input type="checkbox"/> any active case              <input type="checkbox"/> w/ _____</p>				

<p><b>Conditions:</b></p> <input type="checkbox"/> SA Evaluation <input type="checkbox"/> Psych Evaluation <input type="checkbox"/> Anger Management <input type="checkbox"/> BatterP <input type="checkbox"/> within _____ Days <input type="checkbox"/> Random UA <input type="checkbox"/> Waive THC for 30 Days <input type="checkbox"/> Waive Search & Seizure <input type="checkbox"/> No Alcohol <input type="checkbox"/> No bars, est. where primary purp is sale alcohol <input type="checkbox"/> Curfew 10PM-6AM Except: _____ <input type="checkbox"/> No contact w/ _____ <input type="checkbox"/> No contact w/Co Def. <input type="checkbox"/> Report to P&P: _____ <input type="checkbox"/> No Mind Alt. subs, drugs <input type="checkbox"/> No poppy seeds <input type="checkbox"/> DL susp/rev. for _____ <input type="checkbox"/> All prev. cond. remain <input type="checkbox"/> Standard pharm. Cond. <input type="checkbox"/> Employed FT or 8hr c/s Per week <input type="checkbox"/> No driving w/o valid DL	<p><b>Conditions:</b></p> <input type="checkbox"/> Remanded to PCDC <input type="checkbox"/> until bed space available <input type="checkbox"/> @ _____ <input type="checkbox"/> Enter & complete 1 <sup>st</sup> time <input type="checkbox"/> Including aftercare <input type="checkbox"/> F/B trans. housing <input type="checkbox"/> Early Term _____ <input type="checkbox"/> Early Rollover _____ <input type="checkbox"/> Auto Term _____ <input type="checkbox"/> No Early Term <input type="checkbox"/> Complete _____ hrs. C/S <input type="checkbox"/> @ rate _____ hrs. per <input type="checkbox"/> Week <input type="checkbox"/> Month (Min) <input type="checkbox"/> Waive COS while in & Waiting for program <input type="checkbox"/> May Transfer To: _____ <input type="checkbox"/> Ignition Interlock _____ <input type="checkbox"/> Victim impact panel _____ <input type="checkbox"/> Appear for all status cks <input type="checkbox"/> Forfeit Weapon to PCSO <input type="checkbox"/> DUI School <input type="checkbox"/> Advanced <input type="checkbox"/> 2 sober support meetings Per week	<p><b>Court Costs:</b></p> <input type="checkbox"/> Standard \$550 <input type="checkbox"/> Lessor \$500 <input type="checkbox"/> COP - \$100 <input type="checkbox"/> Attorney fee \$ _____ <input type="checkbox"/> PD <input type="checkbox"/> RC <input type="checkbox"/> Conflict <input type="checkbox"/> PD Indigent Fee \$50 <input type="checkbox"/> COI - \$ _____ to: _____ <input type="checkbox"/> PCSO <input type="checkbox"/> NPRPD <input type="checkbox"/> FHP <input type="checkbox"/> PRPD <input type="checkbox"/> DCPD <input type="checkbox"/> ZPD <input type="checkbox"/> DV \$201 <input type="checkbox"/> RAPE CRISIS \$151 <input type="checkbox"/> Minor \$151 <input type="checkbox"/> FDLE \$100 <input type="checkbox"/> DNA - \$7 <input type="checkbox"/> State Radio \$3 <input type="checkbox"/> Crim. Use of ID \$1,001 <input type="checkbox"/> Trafficking fine & SC. <input type="checkbox"/> \$ _____	<p><b>Court Costs:</b></p> <input type="checkbox"/> Restitution \$ _____ To _____ <input type="checkbox"/> Pay min \$ _____ Per mos beg. _____ <input type="checkbox"/> Costs Imposed as Lien <input type="checkbox"/> C/S opt. \$8.05/hr <input type="checkbox"/> O/S Coe as Lien <input type="checkbox"/> Conc w/ _____ <input type="checkbox"/> Consec _____ <input type="checkbox"/> Pay Coe \$ _____ Within _____ <input type="checkbox"/> \$1 per mos. step <input type="checkbox"/> Pay: _____ <input type="checkbox"/> C/S In Lieu <input type="checkbox"/> Fine/ SC: \$ _____ <input type="checkbox"/> _____
<p><b>Other Conditions:</b></p> <hr/> <hr/> <hr/>			

**Notes:**

closing arguments by defense & SAO  
 CRT to provide ruling by Friday 3/10/17 to all parties