

FILED

MAY 18 2021

SPOKANE MUNICIPAL COURT

<b>Spokane Municipal Court County of Spokane, State of Washington</b>	
CITY OF SPOKANE, Plaintiff,	
vs	
<i>Werner, Lucas C.</i>	
Participant.	
Date of Birth:	<i>11-27-79</i>

No: *N58732*

Police Report No.: *2120058748*

DEFENDANT TO BE RELEASED

**COMMUNITY COURT MOTION AND ORDER FOR STIPULATED ORDER OF CONTINUANCE**

TIER I     TIER 2     TIER 3

**I. BASIS**

COMES NOW the parties and hereby move the Court to continue the above captioned cause for a period of 3  weeks or  months, then and there to be dismissed if the Defendant has complied with the conditions set forth in this document.

**II. FINDINGS**

After reviewing the case record, the Defendant's prior criminal history, and the basis for the motion, the court finds that the parties have agreed, and the Defendant, by his/her signature, consents to the continuance contained in the motion section of this order, and waives any speedy trial claims the Defendant would otherwise have been entitled to assert due to such delay, and that such disposition is appropriate.

The Defendant understands that he/she has the right to a trial by jury unless he/she waives the right to a jury trial. The Defendant hereby waives his/her right to jury trial and requests that his/her innocence or guilt be decided by a judge.

The Defendant wishes to submit the case on the record. The Defendant understands this means that if a judge finds the Defendant is in breach of this agreement, the judge will read the police reports only and will review any other materials referenced therein, and based solely upon that evidence, the judge will decide the Defendant's innocence or guilt pertaining to the crime(s) charged herein.

**III. ORDER**

IT IS HEREBY ORDERED that the above-captioned cause be, and hereby is, continued to August 17, 2021, at 9:00 AM to be dismissed on that date, provided the condition(s) as indicated below are met. If the following condition(s) are not met, the case shall be reset for hearing to determine whether the order of continuance shall be revoked.

IT IS FURTHER ORDERED that upon entry into the Stipulated Order of Continuance, the Defendant shall be known as the "Participant" for the purpose of the above-captioned cases during such time as he or she remains in the Community Court program.

PARTICIPANT'S INITIALS: *[Signature]*

**A. NON-TREATMENT RELATED CONDITIONS:**

As part of your successful completion of the Community Court Program, it is mandatory that, with the exception of federal holidays, you attend Community Court **AT 9:00 AM EVERY TUESDAY AT DOWNTOWN CITY HALL COMMUNITY COURT BETWEEN NOW AND YOUR PROGRAM GRADUATION DATE LISTED ABOVE.** FAILURE TO ATTEND MAY RESULT IN THE ISSUANCE OF A WARRANT FOR YOUR ARREST AND DETENTION.

Participant stipulates to the accuracy and admissibility of the police report(s).

Participant shall commit no criminal law violations.

If Participant resides in any supportive housing he/she shall abide by all house rules and directions of staff.

Participant shall appear at all scheduled court dates, unless appearance is specifically waived by the prosecution, Participant is incarcerated on a DOC hold, or Participant is in hospital or treatment facility.

Participant shall pay restitution in the amount of \$ \_\_\_\_\_. (As specified by attached Restitution Order).

Participant shall be released to inpatient treatment on: \_\_\_\_\_

**B. TREATMENT/COMMUNITY SERVICE RELATED CONDITIONS:**

**ALL CONDITIONS MARKED BELOW SHALL BE ENTERED INTO WITHIN 7 DAYS OF SIGNING THIS ORDER. ALL TREATMENT SHALL BE COMPLETED AS DIRECTED BY THE SPOKANE COMMUNITY COURT CORE TEAM AND THE TREATMENT AGENCIES MARKED BELOW.**

Participant shall complete any required follow-up treatment. *2 hrs / wk*

Participant shall complete 8 hours of Community Service through a Section 501 (c) Nonprofit Organization with proof of hours completed provided to the Court. If community service is not completed as ordered by the Court, the Participant shall be immediately subject to a violation hearing.

Participant shall complete \_\_\_\_\_ days of Work Crew through the Washington State Department of Corrections. (3 days Minimum, 30 days Maximum).

Participant shall complete \_\_\_\_\_ hours of Life Skills through the Spokane Municipal Court Probation Department. (1 day Maximum).

No possession or consumption of alcohol, marijuana/related THC products, or non-prescribed drugs. As a part of this condition you may be required to submit to a UA or BA request by a Spokane Municipal Court Probation Officer, any law enforcement officer or Judicial Officer.

Geographical Restriction: Do not enter or remain within 2 blocks of \_\_\_\_\_

Participant shall immediately contact and continue to follow-up with the Social Service Providers marked below:

PARTICIPANT'S INITIALS: *[Signature]*

**Education:**

GED Adult

Spokane Public Library ED Resources

**Employment:**

Next Generation Zone

Work Source

**Housing:**

Goodwill - Homeless Reentry/HEN

SNAP (Housing) *Bob*

Volunteers of America

Homeless Re-Entry (FBH)

Veterans Homeless Outreach (Goodwill)

Healthcare for Homeless Vets (SSVP)

**Identification – Driver's License:**

Department of Licensing for ID

Other: \_\_\_\_\_

**Medical:**

Affordable Care Act Navigator

CHAS Clinic

Molina Health Care

HOTSPOTTERS CASE MANAGEMENT

CHPW

Providence Consistent Care

**Mental Health:**

Frontier Behavioral Health

SPARC Integrated

**Probation:**

Compliance with DOC Probation

Compliance with Drug Court Program

**Restriction:**

Electronic Home Monitoring

TAD Unit

Geographical: See above

HOC/Hope House

**Services:**

DSHS Funding

DSHS Support Enforcement

House of Charity Case Mgt

Lutheran Family Services

Fulcrum RISE Program

GU Law Juvenile Record Expungement

Lions Club - Reading Glasses

Salvation Army

**Social Security**

Social Security Administration

Social Security Disability Attorney

**Transition:**

House of Charity - Bridges Program

CC Volunteer/Mentorship Program

Women's Hearth

Other: Truth Ministries

PARTICIPANT'S INITIALS: \_\_\_\_\_

**Treatment:**

- |  |   |
|--|---|
| <input type="checkbox"/> NEW HORIZON (EVAL + TX) | <input type="checkbox"/> MCAT (FBH)           |
| <input type="checkbox"/> PCE/PCN/PHS             | <input type="checkbox"/> ABHS                 |
| <input type="checkbox"/> STARS- Co-occurring     | <input type="checkbox"/> SPARC - Co-occurring |
| <input type="checkbox"/> YFA Co-occurring        | <input type="checkbox"/> Other: _____         |

Failure to complete the marked condition(s) could result in the City Prosecutor recommending a violation be found. If revocation follows violation, the Prosecutor will recommend a sanction which could include 1 jail, day ehm,     DOC,     additional community service,     other.

**C. INCENTIVES FOR TIMELY PROGRESS SUCCESSFUL COMPLETION:**

Community Court also offers other incentives for your timely progress and successful completion in the Community Court program, including:

- Reduced attendance requirements;
- Public acknowledgment of your success to staff, providers, and other participants;
- Bus passes;
- Extra lunches;
- Toiletries and
- Others as appropriate.


**D. SUCCESSFUL COMPLETION:**


Dismissal with prejudice of the criminal charges shall take place so long as the Participant completes all specified conditions contained in this agreement. A graduation shall be presented as evidence of commitment and success.

**WAIVER OF OBJECTION TO TRIAL SETTING - CrRLJ 3.3(d)(3)**

I am aware that I have the right to trial within 60 days of the commencement date if I am in jail on this case, or within 90 days of the commencement date if I am not in jail on this case. I voluntarily give up this right and I agree to the dates as stated above.


I hereby authorize my counsel to waive my appearance and continue the case(s) when I am in treatment or incarcerated in another jurisdiction.

  
 \_\_\_\_\_  
 PARTICIPANT

  
 \_\_\_\_\_  
 ATTORNEY FOR PARTICIPANT WSBA# 30099

ASSISTANT CITY PROSECUTOR, WSBA # 40516

Dated this 18 day of 5, 2021

  
 \_\_\_\_\_  
 JUDGE/COMMISSIONER

PARTICIPANT'S INITIALS: \_\_\_\_\_