

**IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR THE COUNTY OF JACKSON**

|                      |   |                                  |
|----------------------|---|----------------------------------|
| State of Oregon,     | ) |                                  |
| Plaintiff            | ) |                                  |
|                      | ) | Case No.: 18CR39569              |
| vs.                  | ) |                                  |
|                      | ) | <b>JUDGMENT</b>                  |
|                      | ) |                                  |
| Angela Rose Capello, | ) | Case File Date: 06/07/2018       |
| Defendant            | ) | District Attorney File #: 314171 |

**DEFENDANT**

|                                             |                                           |
|---------------------------------------------|-------------------------------------------|
| True Name: Angela Rose Capello              | Sex: Female                               |
| Date Of Birth: 10/16/1979                   | State Identification No (SID): 22714471OR |
| Fingerprint Control No (FPN): JJAC118009441 |                                           |
| Alias(es): Angela R Capello                 |                                           |

**HEARING**

Proceeding Date: 01/07/2019  
Judge: Lisa Greif  
Court Reporter: Welch, M.

Defendant appeared in person and was not in custody. The court determined that the defendant was indigent for purposes of court-appointed counsel, and the court appointed counsel for the defendant. The defendant was represented by Attorney(s) Samantha R Evans, OSB Number 093469. Plaintiff appeared by and through Attorney(s) MELISSA M CHUREAU, OSB Number 022726.

**COUNT(S)**

It is adjudged that the defendant has been convicted on the following count(s):

**Count 1 : Making a False Claim for Health Care Payment**

Count number 1, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or between 01/15/2016 and 04/04/2016. Conviction is based upon a Guilty Plea on 11/28/2018.

**Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 1 is 6 and the Criminal History Classification (CHC) is I.

## **Probation**

Defendant is sentenced to Supervised Probation for a period of 3 year(s) and shall be subject to the following conditions of Probation:

Defendant is subject to all general conditions of probation (ORS 137.540).

Furthermore, Defendant is subject to the following Special Conditions of Probation (ORS 137.540(2)):  
Defendant shall:

- Obey all laws.
- Comply with all conditions and procedures of accounting office regarding payment of fines, restitution and fees imposed. Abide by the financial conditions of probation document furnished to you by the court, probation officer or Department of Justice collection agent.
- Supervised Probation: Report immediately to Jackson County Community Justice, 1101 West Main, Medford, OR 97501 within 24 hours of your sentencing unless you are in custody. If in custody, report within 24 hours of your release from jail.
- Pay restitution in an amount to be determined as ordered and pursuant to ORS 137.106(b). Defense stipulates the State does not need to detail the nature and amount of economic damages at this time.
- Restitution is to be paid joint and several with co-defendant(s), if convicted.
- No application for public benefits to which not entitled.
- No employment providing health or other dependent care or any in-home services whether by private pay or payment directly or indirectly with Medicaid or Medicare funds or acting as any person's Power of Attorney of representative in any capacity except for Defendant's minor children.

Pursuant to the sentencing guidelines grid, the Defendant is subject to 180 sanction units with 90 jail units.

## **Count 2 : Aggravated Theft in the First Degree**

Count number 2, Aggravated Theft in the First Degree, 164.057, Felony Class B, committed on or between 02/05/2016 and 04/19/2016. Conviction is based upon a Guilty Plea on 11/28/2018.

## **Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 2 is 5 and the Criminal History Classification (CHC) is G.

## **Probation**

Defendant is sentenced to Supervised Probation for a period of 2 year(s) and shall be subject to the following conditions of Probation:

Defendant is subject to all general conditions of probation (ORS 137.540).

Furthermore, Defendant is subject to the following Special Conditions of Probation (ORS 137.540(2)):  
Defendant shall:

- Obey all laws.
- Comply with all conditions and procedures of accounting office regarding payment of fines, restitution and fees imposed. Abide by the financial conditions of probation document furnished to you by the court, probation officer or Department of Justice collection agent.
- Supervised Probation: Report immediately to Jackson County Community Justice, 1101 West Main, Medford, OR 97501 within 24 hours of your sentencing unless you are in custody. If in custody, report within 24 hours of your release from jail.
- No application for public benefits to which not entitled.
- No employment providing health or other dependent care or any in-home services whether by private pay or payment directly or indirectly with Medicaid or Medicare funds or acting as any person's Power of Attorney of representative in any capacity except for Defendant's minor children.

Pursuant to the sentencing guidelines grid, the Defendant is subject to 120 sanction units with 60 jail units.

### **Count 3 : Making a False Claim for Health Care Payment**

Count number 3, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or between 04/15/2016 and 07/05/2016. Conviction is based upon a Guilty Plea on 11/28/2018.

## **Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 3 is 6 and the Criminal History Classification (CHC) is F.

## **Probation**

Defendant is sentenced to Supervised Probation for a period of 3 year(s) and shall be subject to the following conditions of Probation:

Defendant is subject to all general conditions of probation (ORS 137.540).

Furthermore, Defendant is subject to the following Special Conditions of Probation (ORS 137.540(2)):  
Defendant shall:

- Obey all laws.
- Comply with all conditions and procedures of accounting office regarding payment of fines, restitution and fees imposed. Abide by the financial conditions of probation document furnished to you by the court, probation officer or Department of Justice collection agent.
- Supervised Probation: Report immediately to Jackson County Community Justice, 1101 West Main, Medford, OR 97501 within 24 hours of your sentencing unless you are in custody. If in custody, report within 24 hours of your release from jail.
- No application for public benefits to which not entitled.
- No employment providing health or other dependent care or any in-home services whether by private pay or payment directly or indirectly with Medicaid or Medicare funds or acting as any person's Power of Attorney of representative in any capacity except for Defendant's minor children.

Pursuant to the sentencing guidelines grid, the Defendant is subject to 180 sanction units with 90 jail units.

#### **Count 4 : Aggravated Theft in the First Degree**

Count number 4, Aggravated Theft in the First Degree, 164.057, Felony Class B, committed on or between 05/05/2016 and 07/21/2016. Conviction is based upon a Guilty Plea on 11/28/2018.

#### **Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 4 is 5 and the Criminal History Classification (CHC) is F.

This sentence is pursuant to the following special factors:

- Sentence per ORS 137.717

The court finds substantial and compelling reason for a Downward Durational Departure, as stated on the record. This departure is pursuant to the following aggravating or mitigating factor(s):

- Stipulation of Parties

#### **Sentence Instructions**

Defendant shall:

- Comply with all conditions and procedures of accounting office regarding payment of fines, restitution and fees imposed. Abide by the financial conditions of probation document furnished to you by the court, probation officer or Department of Justice collection agent.

## **Incarceration**

Defendant is sentenced to the custody of Oregon Dept of Corrections, for a period of 18 month(s). Defendant is remanded to the custody of the Jackson Sheriff for transportation to the Oregon Dept of Corrections for service of this sentence. Defendant may receive credit for time served.

The Defendant may be considered by the executing or releasing authority for any form of Reduction in Sentence, Conditional or Supervised Release Program, Temporary Leave From Custody, Work Release authorized by law for which the Defendant is otherwise eligible at the time of sentencing. The Defendant may be considered for release on post-prison supervision under ORS 421.508(4) upon successful completion of an alternative incarceration program.

## **Post-Prison Supervision**

The term of Post-Prison Supervision is 2 year(s). If the Defendant violates any of the conditions of post-prison supervision, the defendant shall be subject to sanctions including the possibility of additional imprisonment in accordance with the rules of the State Sentencing Guidelines Board. The court recommends as a condition of post-prison supervision:

- The Money Judgment amounts are hereby made a part of this judgment and it is a recommendation that they be made a condition of post prison supervision.

## **Count 5 : Making a False Claim for Health Care Payment**

Count number 5, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or between 07/20/2016 and 10/03/2016. Conviction is based upon a Guilty Plea on 11/28/2018.

## **Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 5 is 6 and the Criminal History Classification (CHC) is E.

## **Sentence Instructions**

Defendant shall:

- Comply with all conditions and procedures of accounting office regarding payment of fines, restitution and fees imposed. Abide by the financial conditions of probation document furnished to you by the court, probation officer or Department of Justice collection agent.

## **Incarceration**

Defendant is sentenced to the custody of Oregon Dept of Corrections, for a period of 10 month(s). Defendant is remanded to the custody of the Jackson County Sheriff for transportation to the Supervisory Authority for service of this sentence. Defendant may receive credit for time served.

The Defendant may be considered by the executing or releasing authority for any form of Reduction in Sentence, Conditional or Supervised Release Program, Temporary Leave From Custody, Work Release authorized by law for which the Defendant is otherwise eligible at the time of sentencing. The Defendant may be considered for release on post-prison supervision under ORS 421.508(4) upon successful completion of an alternative incarceration program.

This sentence shall be concurrent with the following cases Count 4.

### **Post-Prison Supervision**

The term of Post-Prison Supervision is 2 year(s). If the Defendant violates any of the conditions of post-prison supervision, the defendant shall be subject to sanctions including the possibility of additional imprisonment in accordance with the rules of the State Sentencing Guidelines Board. The court recommends as a condition of post-prison supervision:

- The Money Judgment amounts are hereby made a part of this judgment and it is a recommendation that they be made a condition of post prison supervision.

### **Count 6 : Aggravated Theft in the First Degree**

Count number 6, Aggravated Theft in the First Degree, 164.057, Felony Class B, committed on or between 08/04/2016 and 11/30/2016. Conviction is based upon a Guilty Plea on 11/28/2018.

### **Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 6 is 5 and the Criminal History Classification (CHC) is E.

This sentence is pursuant to the following special factors:

- Sentence per ORS 137.717

The court finds substantial and compelling reason for a Downward Durational Departure, as stated on the record. This departure is pursuant to the following aggravating or mitigating factor(s):

- Stipulation of Parties

### **Sentence Instructions**

Defendant shall:

- Comply with all conditions and procedures of accounting office regarding payment of fines, restitution and fees imposed. Abide by the financial conditions of probation document furnished to you by the court, probation officer or Department of Justice collection agent.

### **Incarceration**

Defendant is sentenced to the custody of Oregon Dept of Corrections, for a period of 18 month(s). Defendant is remanded to the custody of the Jackson Sheriff for transportation to the Oregon Dept of Corrections for service of this sentence. Defendant may receive credit for time served.

The Defendant may be considered by the executing or releasing authority for any form of Reduction in Sentence, Conditional or Supervised Release Program, Temporary Leave From Custody, Work Release authorized by law for which the Defendant is otherwise eligible at the time of sentencing. The Defendant may be considered for release on post-prison supervision under ORS 421.508(4) upon successful completion of an alternative incarceration program.

This sentence shall be concurrent with the following cases Counts 4 and 5.

### **Post-Prison Supervision**

The term of Post-Prison Supervision is 2 year(s). If the Defendant violates any of the conditions of post-prison supervision, the defendant shall be subject to sanctions including the possibility of additional imprisonment in accordance with the rules of the State Sentencing Guidelines Board. The court recommends as a condition of post-prison supervision:

- The Money Judgment amounts are hereby made a part of this judgment and it is a recommendation that they be made a condition of post prison supervision.

### **COUNTS DISPOSED WITH NO CONVICTION**

Count # 7, Making a False Claim for Health Care Payment is Dismissed.

Count # 8, Aggravated Theft in the First Degree is Dismissed.

Count # 9, Making a False Claim for Health Care Payment is Dismissed.

Count # 10, Aggravated Theft in the First Degree is Dismissed.

Count # 11, Making a False Claim for Health Care Payment is Dismissed.

Count # 12, Aggravated Theft in the First Degree is Dismissed.

Count # 13, Making a False Claim for Health Care Payment is Dismissed.

Count # 14, Aggravated Theft in the First Degree is Dismissed.

Count # 15, Making a False Claim for Health Care Payment is Dismissed.

Count # 16, Aggravated Theft in the First Degree is Dismissed.

Count # 17, Making a False Claim for Health Care Payment is Dismissed.

Count # 18, Theft in the First Degree is Dismissed.

Count # 19, Making a False Claim for Health Care Payment is Dismissed.

Count # 20, Theft in the First Degree is Dismissed.

Count # 21, Making a False Claim for Health Care Payment is Dismissed.

Count # 22, Theft in the First Degree is Dismissed.

Count # 23, Making a False Claim for Health Care Payment is Dismissed.

Count # 24, Theft in the First Degree is Dismissed.

Count # 25, Making a False Claim for Health Care Payment is Dismissed.

Count # 26, Theft in the First Degree is Dismissed.

If convicted of a felony or a crime involving domestic violence, you may lose the right to buy, sell, transport, receive, or possess a firearm, ammunition, or other weapons in both personal and professional endeavors pursuant to ORS 166.250, ORS 166.291, ORS 166.300, and/or 18 USC 922(g).

## Payment Schedule

Payment of the fines, fees, assessments, and/or attorney's fees noted in this and any subsequent Money Award shall be scheduled by the clerk of the court pursuant to ORS 161.675.

Payable to:

**Jackson County Circuit Court**  
**100 S. Oakdale Ave**  
**Medford, Oregon 97501**  
**P: 541-776-7171**  
**F: <http://courts.oregon.gov/jackson>**

Dated the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Signed: 1/7/2019 01:43 PM

Signed: \_\_\_\_\_

Lisa Greif



Circuit Court Judge Lisa Greif