

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

State of Oregon,	)	
Plaintiff	)	
	)	Case No.: 16CR07044
vs.	)	
	)	JUDGMENT
	)	
Lourdes M De Gonzalez,	)	Case File Date: 02/05/2016
Defendant	)	District Attorney File #: 005278203

DEFENDANT

True Name: Lourdes M De Gonzalez Sex: Female
Date Of Birth: 01/29/1947

HEARING

Proceeding Date: 08/10/2016
Judge: Eve L Miller
Court Reporter: FTR, Courtroom 5

Defendant appeared in person and was not in custody. The defendant was represented by Attorney(s) ETHAN LEVI, OSB Number 994255. 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 about 10/15/2013. Conviction is based upon a Guilty Plea on 02/08/2016.

Sentencing Guidelines

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

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

- By Stipulation.

Probation

Defendant is sentenced to Supervised Probation for a period of 60 month(s) and shall be subject to the following conditions of Probation:

Defendant is subject to the following general conditions of probation (ORS 137.540):

- Defendant is subject to all general conditions of probation. (ORS 137.540)
- Obey all laws, court orders, and conditions of probation including HOPE Court conditions if ordered.
- Pay all fines, fees, costs, assessments and restitution set forth in the Money Judgment section of this order.
- Keep the court advised of current mailing address at all times.
- Report to collections clerk, Clackamas County Courthouse, 807 Main Street, Room 104 to set up a payment plan immediately following court or w/in 24 hours of release.
- Report to Clackamas County Corrections, 1024 Main Street, Oregon City immediately following court or w/in 24 hours of release.

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

- Defendant shall not be employed 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, no application for benefits for which not entitled.

Monetary Terms

Defendant shall be required to pay the following amounts on this count:

Fees and Assessments: Payable to the Court.

Type	Amount	Modifier	Reduction	Actual Owed
Fine - Felony	\$260.00	Suspend	\$260.00	\$0.00
Total	\$260.00		\$260.00	\$0.00

Compensatory Fine/Restitution:

Restitution is ordered to be paid to the court and disbursed to the payee(s) named below.

Payee	Amount
DHS/AR & Receipting Unit Joint and Several Liability with: Leticia Dominguez Case#: 16CR09225	\$114,987.06
Total	\$114,987.06

Count 2 : Making a False Claim for Health Care Payment

Count number 2, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or about 02/15/2014. Conviction is based upon a Guilty Plea on 02/08/2016.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 2 is 6 and the Criminal History Classification (CHC) is G.

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

- By Stipulation

Probation

Defendant is sentenced to Supervised Probation for a period of 60 month(s) and shall be subject to the following conditions of Probation:

Defendant is subject to the following general conditions of probation (ORS 137.540):

- Defendant is subject to all general conditions of probation. (ORS 137.540)
- Obey all laws, court orders, and conditions of probation including HOPE Court conditions if ordered.
- Pay all fines, fees, costs, assessments and restitution set forth in the Money Judgment section of this order.
- Keep the court advised of current mailing address at all times.
- Report to collections clerk, Clackamas County Courthouse, 807 Main Street, Room 104 to set up a payment plan immediately following court or w/in 24 hours of release.
- Report to Clackamas County Corrections, 1024 Main Street, Oregon City immediately following court or w/in 24 hours of release.

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

- Defendant shall not be employed 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, no application for benefits for which not entitled.

Monetary Terms

Defendant shall be required to pay the following amounts on this count:

Fees and Assessments: Payable to the Court.

Type	Amount	Modifier	Reduction	Actual Owed
Fine - Felony	\$260.00	Suspend	\$260.00	\$0.00
Total	\$260.00		\$260.00	\$0.00

Count 3 : Aggravated Theft in the First Degree

Count number 3, Aggravated Theft in the First Degree, 164.057, Felony Class B, committed on or about 02/19/2014. Conviction is based upon a Guilty Plea on 02/08/2016.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 3 is 5 and the Criminal History Classification (CHC) is F.

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

- By Stipulation.

Probation

Defendant is sentenced to Supervised Probation for a period of 60 month(s) and shall be subject to the following conditions of Probation:

Defendant is subject to the following general conditions of probation (ORS 137.540):

- Defendant is subject to all general conditions of probation. (ORS 137.540)
- Obey all laws, court orders, and conditions of probation including HOPE Court conditions if ordered.
- Pay all fines, fees, costs, assessments and restitution set forth in the Money Judgment section of this order.
- Keep the court advised of current mailing address at all times.
- Report to collections clerk, Clackamas County Courthouse, 807 Main Street, Room 104 to set up a payment plan immediately following court or w/in 24 hours of release.
- Report to Clackamas County Corrections, 1024 Main Street, Oregon City immediately following court or w/in 24 hours of release.

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

- Defendant shall not be employed 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, no application for benefits for which not entitled.

Monetary Terms

Defendant shall be required to pay the following amounts on this count:

Fees and Assessments: Payable to the Court.

Type	Amount	Modifier	Reduction	Actual Owed
Fine - Felony	\$260.00	Suspend	\$260.00	\$0.00
Total	\$260.00		\$260.00	\$0.00

Count 4 : Making a False Claim for Health Care Payment

Count number 4, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or about 06/15/2014. Conviction is based upon a Guilty Plea on 02/08/2016.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 4 is 6 and the Criminal History Classification (CHC) is C.

This sentence is pursuant to the following special factors:

- Sentence per ORS 137.717
- Stipulated False Gridblock.

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

- Stipulations of the parties.

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

- Stipulations of the parties.

Probation

Defendant is sentenced to Supervised Probation for a period of 60 month(s) and shall be subject to the following conditions of Probation:

Defendant is subject to the following general conditions of probation (ORS 137.540):

- Defendant is subject to all general conditions of probation. (ORS 137.540)
- Obey all laws, court orders, and conditions of probation including HOPE Court conditions if ordered.
- Pay all fines, fees, costs, assessments and restitution set forth in the Money Judgment section of this order.
- Keep the court advised of current mailing address at all times.
- Report to collections clerk, Clackamas County Courthouse, 807 Main Street, Room 104 to set up a payment plan immediately following court or w/in 24 hours of release.
- Report to Clackamas County Corrections, 1024 Main Street, Oregon City immediately following court or w/in 24 hours of release.

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

- Defendant shall not be employed 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, no application for benefits for which not entitled.

Jail as a Condition of Probation

Defendant is confined to jail for 10 day(s). Defendant is remanded to the custody of the Clackamas County Sheriff for transportation to the Supervisory Authority for service of this sentence. Defendant must serve one (1) day in the Clackamas County Jail, after that time she is eligible for alternative sanctions including electronic home detention. Defendant may receive credit for time served.

The Defendant may be considered by the supervisory authority for any form of alternative sanction authorized by ORS 423.478, and the defendant shall pay any required per diem fees.

Monetary Terms

Defendant shall be required to pay the following amounts on this count:

Fees and Assessments: Payable to the Court.

Type	Amount	Modifier	Reduction	Actual Owed
Fine - Felony	\$260.00	Suspend	\$260.00	\$0.00
Total	\$260.00		\$260.00	\$0.00

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).

MONEY AWARD INCLUDING RESTITUTION

Judgment Creditor: State of Oregon

Judgment Debtor: Lourdes M De Gonzalez

Restitution

Payee	Amount
DHS/AR & Receipting Unit Joint and Several Liability with: Leticia Dominguez Case#: 16CR09225	\$114,987.06

Payees are to be paid as ordered under Monetary Terms.

Defendant is ordered to pay the following monetary totals, including restitution or compensatory fine amounts stated above, which are listed in the Money Award portion of this document:

Type	Amount Owed
Restitution Joint and Several	\$114,987.06
Total	\$114,987.06

Money Award total does not include reduced amounts of \$1,040.00 as stated in the individual counts.

The court may increase the total amount owed by adding collection fees and other assessments. These fees and assessments may be added without further notice to the defendant and without further court order.

Subject to amendment of a judgment under ORS 137.107, money required to be paid as a condition of probation remains payable after revocation of probation only if the amount is included in the money award portion of the judgment document, even if the amount is referred to in other parts of the judgment document.

Any financial obligation(s) for conviction(s) of a violation, which is included in the Money Award, creates a judgment lien.

Payment Schedule

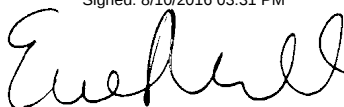
Payment of the fines, fees, assessments, and/or attorney's fees noted in this and any subsequent Money Award shall be scheduled by the clerk of the court pursuant to ORS 161.675.

Payable to:

Clackamas County Circuit Court
807 Main St
Oregon City, Oregon 97045
P: 503.655.8447
F: <http://courts.oregon.gov/Clackamas>

Dated the _____ day of _____, 20____

Signed: 8/10/2016 03:31 PM



Signed: _____

Eve L Miller

Circuit Court Judge Eve Miller