

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

State of Oregon,

Plaintiff

vs

Crystal Nettifee,

Defendant

Case No : 16CR73701

**JUDGMENT**

Case File Date. 11/16/2016

District Attorney File #: 137702

**DEFENDANT**

True Name: Crystal Nettifee

Sex: Female

Date Of Birth: 03/01/1978

Fingerprint Control No (FPN): JJOS117184663

**HEARING**

Proceeding Date: 04/17/2017

Judge: Thomas M Hull

Court Reporter: FTR Recording, Courtroom 1

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) LAURIE RACHELE NORMAN, OSB Number 060819. Plaintiff appeared by and through Attorney(s) MELISSA M CHUREAU, OSB Number 022726. Defendant knowingly waived two day waiting period before sentencing.

**COUNT(S)**

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

**Count 8 : Making a False Claim for Health Care Payment**

Count number 8, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or between 11/18/2015 and 12/03/2015. Conviction is based upon a No Contest Plea on 04/17/2017.

**Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 8 is 6 and the Criminal History Classification (CHC) is I.

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## 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:

- Consent to and cooperate with any plan deemed necessary by the Probation Officer or therapist to maintain and monitor offense-free behavior for the duration of probation.
  - Submit to polygraph examination by a qualified examiner, at direction of Probation Officer to determine compliance to conditions of supervision; results are usable at revocation proceedings.
  - Report to Probation Officer within 24 hours after court or upon release.
  - Pay fines, fees, restitution, or other fees as ordered by the court.
  - Enroll and complete parenting classes as recommended by CLCM.
- Do not be employed providing health care 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 except as her daughter's Power of Attorney until daughter turns twenty-one.
- Do not apply for benefits for which defendant is not entitled.
- Attorney fees and fines were not ordered on this case.

## Statutory Provisions

Defendant is ordered to submit blood or buccal sample and thumbprint pursuant to ORS 137.076.

## Monetary Terms

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

### Compensatory Fine/Restitution:

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

| Payee                                                                                                       | Amount             |
|-------------------------------------------------------------------------------------------------------------|--------------------|
| Department of Human Services<br>Joint and Several Liability with:<br>Darrel Lisinski<br>Case#:<br>16CR73685 | \$54,107.50        |
| <b>Total</b>                                                                                                | <b>\$54,107.50</b> |

## Count 9 : Theft in the First Degree - Theft by Deception

Count number 9, Theft in the First Degree - Theft by Deception, 164.055, Felony Class C, committed on or between

08/18/2015 and 01/31/2016. Conviction is based upon a No Contest Plea on 04/17/2017.

### **Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 9 is 3 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:

- Consent to and cooperate with any plan deemed necessary by the Probation Officer or therapist to maintain and monitor offense-free behavior for the duration of probation.
- Submit to polygraph examination by a qualified examiner, at direction of Probation Officer to determine compliance to conditions of supervision; results are usable at revocation proceedings.
- Pay fines, fees, restitution, or other fees as ordered by the court.
- Report to Probation Officer within 24 hours after court or upon release.
- Enroll and complete parenting classes as recommended by CLCM.  
Do not be employed providing health care 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 except as her daughter's Power of Attorney until daughter turns twenty-one.  
Do not apply for benefits for which defendant is not entitled.

### **Statutory Provisions**

Defendant is ordered to submit blood or buccal sample and thumbprint pursuant to ORS 137.076.

### **Count 13 : Theft in the Second Degree - Theft by Deception**

Count number 13, Theft in the Second Degree - Theft by Deception, 164.045, Misdemeanor Class A, committed on or between 12/18/2015 and 04/30/2016. Conviction is based upon a No Contest Plea on 04/17/2017.

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## Probation

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

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

- Pursuant to ORS 137.540(1), the Court's intention was to specifically delete all conditions listed in said ORS except those special conditions specifically ordered in the judgment.
- Obey all laws, municipal, county, state and federal.
- Pay fines, fees, restitution, or other fees as ordered by the court.

## 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     |
|---------------------|-----------------|----------|-----------|-----------------|
| Bench Probation Fec | \$100.00        |          |           | \$100.00        |
| <b>Total</b>        | <b>\$100.00</b> |          |           | <b>\$100.00</b> |

## Count 17 : Making a False Claim for Health Care Payment

Count number 17, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or between 06/21/2016 and 07/06/2016. Conviction is based upon a No Contest Plea on 04/17/2017.

## Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 17 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:

- Consent to and cooperate with any plan deemed necessary by the Probation Officer or therapist to maintain and monitor offense-free behavior for the duration of probation.
- Submit to polygraph examination by a qualified examiner, at direction of Probation Officer to determine compliance to conditions of supervision; results are usable at revocation proceedings.
- Report to Probation Officer within 24 hours after court or upon release.
- Pay fines, fees, restitution, or other fees as ordered by the court.
- Enroll and complete parenting classes as recommended by CLCM.

Do not be employed providing health care 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 except as her daughter's Power of Attorney until daughter turns twenty-one.

Do not apply for benefits for which defendant is not entitled.

**Statutory Provisions**

Defendant is ordered to submit blood or buccal sample and thumbprint pursuant to ORS 137.076.

**Count 18 : Theft in the First Degree - Theft by Deception**

Count number 18, Theft in the First Degree - Theft by Deception, 164.055, Felony Class C, committed on or between 03/18/2016 and 08/30/2016. Conviction is based upon a No Contest Plea on 04/17/2017.

**Sentencing Guidelines**

The Crime Severity Classification (CSC) on Count Number 18 is 3 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 Dispositional Departure, as stated on the record. This departure is pursuant to the following aggravating or mitigating factor(s):

- Stipulation of the parties

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### **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:

- Consent to and cooperate with any plan deemed necessary by the Probation Officer or therapist to maintain and monitor offense-free behavior for the duration of probation.
- Submit to polygraph examination by a qualified examiner, at direction of Probation Officer to determine compliance to conditions of supervision; results are usable at revocation proceedings.
- Pay fines, fees, restitution, or other fees as ordered by the court.
- Enroll and complete parenting classes as recommended by CLCM.  
Do not be employed providing health care 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 except as her daughter's Power of Attorney until daughter turns twenty-one.  
Do not apply for benefits for which defendant is not entitled.
- Report to Probation Officer within 24 hours after court or upon release.
- Defendant stipulates to 18 months DOC, less time served, if probation is revoked.

### **Jail as a Condition of Probation**

Defendant is confined to jail for 60 day(s). Defendant is to report to Supervisory Authority by 04/17/2017 at 4:00 PM. 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.

### **Statutory Provisions**

Defendant is ordered to submit blood or buccal sample and thumbprint pursuant to ORS 137.076.

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

Count # 1, Making a False Claim for Health Care Payment is Dismissed.

Count # 2, Making a False Claim for Health Care Payment is Dismissed.

Count # 3, Making a False Claim for Health Care Payment is Dismissed.  
 Count # 4, Theft in the Second Degree is Dismissed.  
 Count # 5, Making a False Claim for Health Care Payment is Dismissed.  
 Count # 6, Making a False Claim for Health Care Payment is Dismissed.  
 Count # 7, Making a False Claim for Health Care Payment is Dismissed.  
 Count # 10, Making a False Claim for Health Care Payment is Dismissed.  
 Count # 11, Making a False Claim for Health Care Payment is Dismissed.  
 Count # 12, Making a False Claim for Health Care Payment is Dismissed.

Count # 14, Making a False Claim for Health Care Payment is Dismissed.

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

Count # 16, Making a False Claim for Health Care Payment 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).

## MONEY AWARD INCLUDING RESTITUTION

**Judgment Creditor: State of Oregon**

**Judgment Debtor: Crystal Nettifee**

### Restitution

| Payee                                                                                                       | Amount      |
|-------------------------------------------------------------------------------------------------------------|-------------|
| Department of Human Services<br>Joint and Several Liability with:<br>Darrel Lisinski<br>Case#:<br>16CR73685 | \$54,107.50 |

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 | \$54,107.50 |
| Bench Probation Fee           | \$100.00    |

Total

\$54,207.50

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:

**Josephine County Circuit Court**  
**500 NW 6th Street Dept 17**  
**Grants Pass, Oregon 97526**  
**P: 541.476.2309**  
**F: <http://courts.oregon.gov/Josephine>**

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

Signed 4/18/2017 02:43 PM

Signed:

Thomas M Hull



**Circuit Court Judge Thomas M. Hull**