

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

State of Oregon,	)	
Plaintiff	)	
	)	Case No.: 18CR39589
vs.	)	
	)	JUDGMENT
	)	
Daniel Edward Smith,	)	Case File Date: 06/07/2018
Defendant	)	District Attorney File #: 314173

DEFENDANT

True Name: Daniel Edward Smith	Sex: Male
Date Of Birth: 03/14/1959	State Identification No (SID): 22715948OR
Fingerprint Control No (FPN): JJAC118009424	

HEARING

Proceeding Date: 08/13/2018
Judge: David G. Hoppe
Court Reporter: Ullrich, S.

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) LAURANCE W PARKER, OSB Number 882863. 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 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 01/15/2016 and 04/04/2016. Conviction is based upon a Guilty Plea on 08/13/2018.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 17 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.
- No application for public benefits to which not allowed.
- No employment providing health or other dependent care of 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 or representative in any capacity.
- 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.
- Restitution is to be paid joint and several with co-defendant(s), if convicted.

Jail as a Condition of Probation

Defendant is confined to jail for 30 day(s). Defendant is to report to Supervisory Authority by 09/26/2018 at 9:00 AM. 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:

Compensatory Fine/Restitution:

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

Payee	Not To Exceed	Amount
DHS		\$11,708.00
Total		\$11,708.00

Count 18 : Theft in the First Degree

Count number 18, Theft in the First Degree, 164.055, Felony Class C, committed on or between 01/15/2016 and 04/19/2016. Conviction is based upon a Guilty Plea on 08/13/2018.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 18 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:

- 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.
- No application for public benefits to which not entitled.
- No employment providing health or other dependent care of 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 or representative in any capacity.
- 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.

Jail as a Condition of Probation

Defendant is confined to jail for 30 day(s). Defendant is to report to Supervisory Authority by 09/26/2018 at 9:00 AM. 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.

Count 19 : Making a False Claim for Health Care Payment

Count number 19, Making a False Claim for Health Care Payment, 165.692, Felony Class C, committed on or between 04/15/2016 and 09/27/2016. Conviction is based upon a Guilty Plea on 08/13/2018.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 19 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.
- No application for public benefits to which not entitled.
- No employment providing health or other dependent care of 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 or representative in any capacity.
- 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.

Jail as a Condition of Probation

Defendant is confined to jail for 30 day(s). Defendant is to report to Supervisory Authority by 09/26/2018 at 9:00 AM. 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.

Count 20 : Theft in the First Degree

Count number 20, Theft in the First Degree, 164.055, Felony Class C, committed on or between 05/05/2016 and 09/27/2016. Conviction is based upon a Guilty Plea on 08/13/2018.

Sentencing Guidelines

The Crime Severity Classification (CSC) on Count Number 20 is 3 and the Criminal History Classification (CHC) is F.

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.
- No application for public benefits to which not entitled.
- No employment providing health or other dependent care of 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 or representative in any capacity.
- 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.

Jail as a Condition of Probation

Defendant is confined to jail for 30 day(s). Defendant is to report to Supervisory Authority by 09/26/2018 at 9:00 AM. 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.

COUNTS DISPOSED WITH NO CONVICTION

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).

MONEY AWARD INCLUDING RESTITUTION

Judgment Creditor: State of Oregon

Judgment Debtor: Daniel Edward Smith

Restitution

Payee	Amount
DHS	\$11,708.00

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	\$11,708.00
Total	\$11,708.00

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.

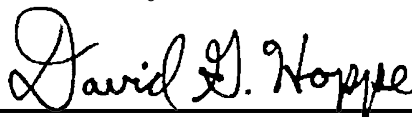
Payable to:

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: 8/15/2018 11:48 AM

Signed: _____



David G. Hoppe

Circuit Court Judge David G. Hoppe