

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

PEOPLE OF THE STATE OF ILLINOIS

or

A Municipal Corporation

v.

GEORGE PELL

☐ Criminal Division ☐ Municipal District No. _____ Br/Rm 101

Case No.: 095006085

Statute Citation: Unlaw Video Recording

IR No. _____ SID No. 61908446

SENTENCING ORDER

SUPERVISION - CONDITIONAL DISCHARGE - PROBATION MISDEMEANOR

IT IS HEREBY ORDERED that the defendant is sentenced to a term of 24 ☐ Year(s) ☒ Month(s) ☐ Day(s)
☐ Supervision ☐ Conditional Discharge ☐ Probation (720 ILCS 550/10, 720 ILCS 570/410, or 720 ILCS 646/70) ☒ Probation
☒ REPORTING (All DUI orders are reporting) ☐ NON-REPORTING ☐ LIMITED REPORTING (Monitor community service or restitution only)
☐ Scheduled Termination Date 8-10-11

IT IS FURTHER ORDERED that the defendant shall comply with the conditions as specified below:

STANDARD CONDITIONS

- ☒ If reporting is ordered, the defendant shall report immediately to:
 - ☐ Social Service Department for conditional discharge/supervision/community service and pay that department such sum as determined by that department in accordance with the standard probation fee guide. Said fee not to exceed \$50.00 per month.
 - or
 - ☒ Adult Probation Department for probation/community service, comply with Adult Probation's rules and regulations and pay that department such sum as determined by that department in accordance with the standard probation fee guide. Said fee not to exceed \$50.00 per month.
- ☒ Pay all fines, costs, fees, assessments, reimbursements and restitution (if applicable)
- ☒ Not violate the criminal statute of any jurisdiction
- ☒ Refrain from possessing a firearm or other dangerous weapons
- ☒ Notify monitoring agency of change of address
- ☒ Not leave the State of Illinois without the consent of the court or monitoring agency
- ☒ Comply with reporting and treatment requirements as determined by the Adult Probation Department assessment. Any treatment requirements not specified elsewhere on this order that would cause a financial hardship shall be reviewed by the court before being imposed.

DRUG/ALCOHOL RELATED CONDITIONS

- ☐ Complete drug/alcohol evaluation and treatment recommendation
- ☐ Submit to random drug testing
- ☐ Adult Probation Department Intensive Drug Program
- ☐ Complete TASC Treatment Program

DUI RELATED CONDITIONS

- ☐ DUI Offenders Classified Level A, report immediately to Central States Institute of Addictions and commence the following intervention program within 60 days of this order:
 - ☐ Minimum ☐ Moderate ☐ Significant
- ☐ DUI Offenders Classified Level B or C, report immediately to:
 - ☐ The Social Service Department,
 - ☐ The Adult Probation Departmentand complete a Comprehensive Correctional Intervention Assessment within 30 days, fully comply with the Comprehensive Intervention Plan and commence the following intervention program within 60 days of this order:
 - ☐ Minimum ☐ Moderate ☐ Significant ☐ High
- ☐ Attend a Victim Impact Panel
- ☐ File proof of financial responsibility with the Secretary of State
- ☐ Surrender driver's license to the Clerk of the Court
- ☐ Pay all driver's license reinstatement fees

SPECIAL CONDITIONS

- ☐ Obtain a GED
- ☐ Home Confinement _____ days
- ☐ Adult Probation Department Intensive Probation Supervision
- ☒ Perform 40 hours of a community service as directed by the
 - ☒ Social Service Department Community Service Program
 - ☐ Sheriff's Work Alternative Program (773) 869-3686
 - ☒ Adult Probation Department
- ☒ Avoid contact with [REDACTED]
- ☐ Complete mental health evaluation and treatment recommendations
- ☐ Adult Probation Department Mental Health Unit
- ☐ Adult Probation Department Gang Unit
- ☐ DNA Indexing

DOMESTIC VIOLENCE RELATED CONDITIONS

- ☒ Comply with all lawful court orders including an Order of Protection
- ☐ Complete Domestic Violence Program:
- ☐ Defendants sentenced to Probation, as directed by Adult Probation
 - ☐ Defendants sentenced to Conditional Discharge or Supervision will complete domestic violence counseling and any other recommendations per the assessment of the Social Service Department, which may include an evaluation and/or treatment for alcohol and drug abuse, mental health, parenting, and sexual abuse.
- ☐ Modifications, which would impose a financial hardship shall be reviewed by the sentencing court before so ordered.

☐ Other No Contact with victim [REDACTED] other than as
authorized for visitation of minor child.
including phone calls + emails to discuss
minor child

SEX OFFENDERS CONDITIONS

- ☐ Complete evaluation and treatment recommendation for sex offenders
- ☐ Register as a sex offender
- ☐ STD/HIV Testing
- ☐ Adult Probation Department Sex Offender Program
- ☐ DNA Testing

RESTITUTION

- ☐ Make restitution to _____
 in the amount of \$ _____, payable through the
 Social Service Department or Adult Probation Department at the rate
 of \$ _____ per _____ with final payment due on or
 before _____.

I acknowledge receipt of this Order and agree to abide by the specified conditions. I agree to accept notice by regular mail at the address provided to the monitoring agency and to answer questions asked by the Court related to my behavior. I understand that a failure to comply with the conditions of this order, or refusal to participate, or withdrawal or discharge from a required program, plan, or testing will be considered a violation of this Order and will be reported to the Court; and may result in a re-sentencing imposing the maximum penalty as provided for the offense.

14047 BELSHAM

(Defendant's Address)

OLLAND PARK

(City/Town)

IL

(State/Zip)

9-21-67

(Defendant's Date of Birth)

312 231 3573

(Defendant's Telephone Number)

[Signature]

(Defendant's Signature)

Dated: 8-12-09Prepared by [Signature]

ENTERED
 AUG 12 2009
 DOROTHY BROWN
 CLERK OF CIRCUIT COURT

ENTERED:Dated: 8-12-09

Judge

Judge's No.

Note: Bold print specifications require additional written orders