

**COUNTY OF SPOTSYLVANIA GENERAL DISTRICT COURT  
MISDEMEANOR PLEA AGREEMENT**

Commonwealth of Virginia  
v.

Case #(s) \_\_\_\_\_

\_\_\_\_\_  
Defendant

\_\_\_\_\_  
Defense Attorney

**1. Acknowledgement of Rights**

- A. I understand the charge(s) against me.
- B. I understand that I have the right to be represented by an attorney.
- C. I understand that if I cannot afford to hire an attorney, the court may appoint one for me.
- D. If I do not have an attorney and I do not qualify for court-appointed counsel, it is my desire to give up my right to counsel and to proceed today without an attorney.
- E. I also understand that a conviction on any criminal charge may carry immigration consequences.
- F. **I understand I have the right to be present in court but waive such and agree to the handling of my matter(s) by video. Additionally, I waive the requirement for original signatures on this document used by the Court.**

2. Other than the terms of this agreement, I have not been promised anything in return for my guilty plea. I am not being forced or threatened to plead guilty. I am entering this agreement under my own free will.

3. I am pleading: (Mark One) **Guilty**  or **No Contest**  to the charges listed below.

- (1) \_\_\_\_\_
- (2) \_\_\_\_\_
- (3) \_\_\_\_\_
- (4) \_\_\_\_\_

I understand that the Attorney for the Commonwealth and I have agreed to following disposition(s) in my matter(s):

	Active Sentence	Suspended Sentence	Min. Mandatory time	Fine	Loss of License
(1)	M / D	M / D	Days	\$	Y / M / D
(2)	M / D	M / D	Days	\$	Y / M / D
(3)	M / D	M / D	Days	\$	Y / M / D
(4)	M / D	M / D	Days	\$	Y / M / D

\* **Y = Years M = Months D = Days**

Other Conditions:

I am pleading guilty pursuant to the following additional provisions:

- 1. I will remain of uniform good behavior and incur no new arrests for \_\_\_\_ years from today's date.
- 2. I will pay the court costs of this proceeding and pay restitution of \$ \_\_\_\_\_ to \_\_\_\_\_ by \_\_\_\_\_
- 3. I will not return to the premises of \_\_\_\_\_
- 4.  I will be placed on Community Based Probation (CBP) (if marked) for \_\_\_\_\_ M / D or upon full payment of restitution or completion of community service work.

Any other term(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Defendant**

**Enter:** \_\_\_\_\_  
**General District Court Judge**

\_\_\_\_\_  
**Attorney for the Defendant**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Attorney for the Commonwealth**