

STATE OF GEORGIA V.

CRIMINAL ACTION NO.: SPCR

CERTIFICATION OF COUNSEL

I, _____, AS ATTORNEY FOR
(PRINT NAME)

DEFENDANT _____
(PRINT NAME)

CERTIFY THAT I HAVE INFORMED DEFENDANT OF THE
APPLICABILITY, IF ANY OF FOLLOWING:

- A. THE FIRST OFFENDER ACT, OCGA § 42-8-60 *ET SEQ.* AND ITS APPLICABILITY TO DEFENDANT;
- B. THE CONDITIONAL DISCHARGE STATUTE, OCGA §16-13-2, AND ITS APPLICABILITY TO DEFENDANT;
- C. THE RECORDS RESTRICTION STATUTE, OCGA 42-8- 62.1, AND ITS APPLICABILITY TO THIS DEFENDANT;
- D. THE BEHAVIORAL INCENTIVE DATE OCGA § 17-10-1(a)(1)(B) AND ITS APPLICABILITY TO THIS DEFENDANT;
- E. THE EFFECT, IF ANY, OF REPEAT OFFENDER SENTENCING;
AND
- F. THE POST-CONVICTION OR POST-SENTENCE REMEDIES INCLUDING MOTIONS TO WITHDRAW PLEAS AND RIGHTS OF APPEAL INCLUDING ALL TIME LIMITS ASSOCIATED THEREWITH.
- G. THE RIGHT TO AN IN-PERSON HEARING IF REQUESTED AND THE POTENTIAL DELAY ASSOCIATED THEREWITH.

THIS _____ DAY OF _____, 20_____.

Acknowledged:

ATTORNEY'S SIGNATURE

BAR NO. _____

EMAIL ADDRESS _____