

**State of Louisiana Uniform Sentencing Commitment Order** (One order per Docket)

Judicial District:		Court Section:	
Parish of Commitment:		Docket Number:	

**A. DEFENDANT/CASE IDENTIFIERS**

Name of Defendant: <sup>(1)</sup>		DOB: <sup>(2)</sup> (MM/DD/YYYY)	
State ID Number (SID) <sup>(3)</sup>		Race: <sup>(4)</sup>	Sex: <sup>(5)</sup>

**B. SENTENCE**

Select: <sup>(1)</sup>  Original  Amended  Revocation  Habitual (Docket # \_\_\_\_\_; Charge \_\_\_\_\_)

	Charges: (Revised Statute & Crime) <sup>(2)</sup>	Number of Counts <sup>(3)</sup>	Verdict/ G Plea/ Nolo/NP <sup>(4)</sup>	Modifiers <sup>(5)</sup>	Total Sentence Length <sup>(6)</sup>	Amount of Time in DPS&C Custody <sup>(7)</sup>	Amount of time to be served without benefit, if applicable <sup>(8)</sup>
					YRS/MONTHS/DAYS	YRS/MONTHS/DAYS	
1							
2							
3							
4							
5							

**C. SENTENCE/OFFENSE DATES (MM/DD/YYYY):**

*(For each of the above numerated convictions)*

	Offense Date <sup>(1)</sup>	Adjudication Date <sup>(2)</sup>	Sentence Date <sup>(3)</sup>	Adjudication as an Habitual Offender per R.S. 15:529.1 <sup>(4)</sup>	Date Original Sentence Vacated <sup>(5)</sup>	Revocation Date <sup>(6)</sup>
1						
2						
3						
4						
5						

**D. SENTENCE CONDITIONS: (Check all that apply)**

<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>This sentence shall be concurrent with any or every sentence the offender is now serving.</b> <sup>(1)</sup>
<b>If no to D.1, then</b>	Docket Number(s) _____ Parish(es), Judicial District(s) of Docket Number(s) _____
<input type="checkbox"/> Concurrent with: <sup>(2)</sup>	
<input type="checkbox"/> Consecutive to: <sup>(3)</sup>	
<input type="checkbox"/>	Under the provision of C.Cr.P. Art. 880, defendant is given credit for time served. <sup>(4)</sup>
<input type="checkbox"/>	Under the provisions of C.Cr.P. Art. 890.1, this is a waiver of mandatory minimum sentence (excludes R.S. 14:2(B) & R.S. 15:541 <i>et seq</i> offenses) <sup>(5)</sup>
<input type="checkbox"/>	This defendant is subject to a multiple bill/habitual offender proceeding. (as per R.S. 15:529.1) <sup>(6)</sup>
<input type="checkbox"/>	The defendant is sentenced in accordance with R.S. 13:5401 to participate in Reentry Court <sup>(7)</sup>
<input type="checkbox"/>	The defendant is ordered to report to start serving his sentence on : _____ (MM/DD/YYYY) <sup>(8)</sup>
<input type="checkbox"/>	The defendant is ordered to report to start serving a probation sentence upon conclusion of his hard labor sentence (split sentence) <sup>(9)</sup>
<input type="checkbox"/>	Under the provisions of C.Cr.P. Art. 895 and R.S. 15:541, <i>et seq</i> , the defendant shall comply with the Sex Offender Registration statute. <sup>(10)</sup>

**E. REFERRALS TO DPS&C (Check all that apply) (See Instructions for More Information on these options.)**

<input type="checkbox"/>	Recommended for Substance Use Disorder Treatment Screening <sup>(1)</sup>
<input type="checkbox"/>	Recommended for Mental Health Evaluation <sup>(2)</sup> Copy by email to: <a href="mailto:mentalhealth@doc.la.gov">mentalhealth@doc.la.gov</a>
<input type="checkbox"/>	Recommended for Intensive Incarceration <sup>(3)</sup> Copy by email to: <a href="mailto:IntensiveIncarceration@doc.la.gov">IntensiveIncarceration@doc.la.gov</a>
<input type="checkbox"/>	Recommended for Immediate Screening for eligibility for Transitional Work Program <sup>(4)</sup> Copy by email to <a href="mailto:twprecommendations@doc.la.gov">twprecommendations@doc.la.gov</a>

Comment: <sup>(5)</sup>

**F. INVOLVED PARTIES (Printed Names and Addresses)**

Minute Clerk:		Court Reporter:	
Prosecutor:		Defense Attorney:	
Address:		Address:	

The above sentence, handed down in Open Court, is the order of this Court and this shall be sufficient warrant for its execution.

**Thus Done and Signed this \_\_\_ day of \_\_\_\_\_, 20\_\_.**

_____ Judge's Signature	Judge's Name and Address:
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