## IN THE CIRCUIT COURT OF THE SEVENTH JUDICIAL CIRCUIT

## MACOUPIN COUNTY, ILLINOIS

THE PEOPLE OF THE STATE		)	
OF ILLINOIS		)	
VS.		)	Case number(s):
		)	
	_ (defendant's name)	)	

## WAIVER OF RIGHTS and GUILTY PLEA

I, \_\_\_\_\_\_ (print defendant's full name), freely and voluntarily state that I understand and waive my rights and plead guilty to the above case(s). I understand and agree to the following (each box must be initialed):

I have a right to appear in person in a courtroom for this plea and waive that right to appear by alternative means.

If I am represented by an attorney, I am satisfied with the attorney's services and the attorney has discussed the terms of the plea to my satisfaction. If I am not represented by an attorney, I understand and waive my right to an attorney, including the appointment of an attorney free of charge if I am unable to afford one.

\_\_\_\_\_No force, threats, or promises have been made to get me to enter into this plea agreement.

\_\_\_\_\_I understand the nature of the charge(s), the sentencing range for the charge(s) in the State of Illinois, along with the direct and collateral consequences of this guilty plea. I understand and agree with all of the terms of my sentence.

I understand and waive my right to a bench trial or jury trial. I waive all rights associated with a bench trial or jury trial including: the right to be present; the right to testify or refuse to testify and that refusal could not be used against me; the right to subpoena witnesses and evidence to support my case at trial; the right to confront and cross examine the witnesses that testify against me; the right to hold the State to its burden proof (beyond a reasonable doubt).

I agree the State has a sufficient factual basis for conviction if this case went to trial.

I understand the following appeal rights: I have a right to an appeal. If I wish to preserve my right to appeal, I must, within 30 days of the guilty plea, file a written Motion to Withdraw Guilty Plea and Vacate Judgment at the Circuit Clerk's Office. All of my reasons must be listed in this motion or I will not be able to argue them at the hearing or on appeal. If my motion is granted, the State can refile any cases or counts that were dismissed pursuant to this plea agreement, and all matters will be set for further hearing. If the Court denies my motion, I can appeal that decision to the Appellate Court and request an attorney and transcript of the hearings free of charge, if I am unable to afford them.

**Date of Defendant's Signature** 

**Defendant's Signature** 

Payments to be made to: Macoupin County Circuit Clerk P.O. Box 197 Carlinville, Illinois 62626. Please put case number(s) on all checks, money orders, etc. For further information: www.macoupincountyil.gov or call (217) 854-3211.