IN THE CIRCUIT COURT OF PANOLA COUNTY, MISSISSIPPI FOR THE SECOND JUDICIAL DISTRICT

STATE OF MISSISSIPPI

vs.	CAUSE	NUMBER CR2019-1	18JMP2	
		COUNT(S)	2	
MATTHEW ORLANI	OO WILBURN			
			S	FILED EP 24 2019
	<u>SENTENCIN</u> POST RELEASE (REPORTING & N	SUPERVISION	MEL	SSA MEEK-PHELPS
The Defendar	nt, <u>Matthew Orlando Wilburn,</u> on	this date, came before	ore the Court for	sentencing
pursuant to a a controlled salstance heroin in vio	ı) (<u>negotiated</u> (10 - 30 grass) ation of Miss. Code Ann. § <u>4/</u> -	plea) to 29-1396 160	guilty of the cha	ge of <u><i>Poss. o</i></u> t
The Defendar	nt was represented by Nick Smit	<u>:h,</u> who was present a	at all times with t	he Defendant.
The State of I	Mississippi was represented by s	Jay Hale, (Assistant)	District Attorney	
The Circuit Co	ourt, therefore, adjudicates the D	Defendant guilty of th	e charge of 🔑	s. of a contro
5 46stmace heroin (10-30 gram	ation of Miss. Code Ann. § <u>///-</u>	29-1396).1(0)		
	FORE ORDERED that for said o			enced to serve
a term of <u>One</u>	(1) and incarceration in the	e Mississippi Departn	nent of Correctio	ns.
IT IS FURTHE	ER ORDERED that upon release	e from the term of inc	carceration set fo	orth in the
preceding paragraph	the said Defendant be and is he	ereby placed under a	a term of Ten	<u>(10)</u>
years of post release	supervision, pursuant to the pro	ovisions of Section 47	7-7-34, M.C.A.	
The period of	post release supervision shall be	e served as follows:	Three (<u>3</u>) years of
reporting post release	e supervision, and <u>Seven</u> (7) years of non-rep	porting post-relea	ase
supervision. During t	he period of reporting post relea	se supervision, the [Defendant is here	eby placed

under the supervision of the Mississippi Department of Corrections until the Court in term time, or the

74/45

Judge in vacation, shall alter, extend, terminate or direct the enforcement of said post release sentence based upon the following terms and conditions: The Defendant shall

- 1. Report within 24 hours of release from court or incarceration to his/her probation officer;
- 2. Commit no crimes;
- 3. Avoid injurious or vicious habits;
- 4. Avoid persons or places or disreputable or harmful character;
- 5. Report to the Department of Corrections as directed;
- 6. Permit the Field Supervisor to visit him at home, work, or elsewhere;
- 7. Work faithfully at suitable employment so far as possible;
- 8. Remain within the State of Mississippi unless authorized to leave on proper application therefore;
- 9. Support his/her dependents;
- 10. Waive extradition to the State of Mississippi from any state of the United States and also agree that he will not contest any effort by any state to return him to the State of Mississippi and does hereby consent to any such extradition;
- 11. Not own or carry, possess with him/her any weapons;
- 12. Pay to the Mississippi Department of Corrections such monthly reporting fees as authorized by the Laws of Mississippi; said fees to be paid monthly by certified check or money order.
- 13. Not have in his/her possession nor use alcoholic beverages, marijuana, narcotics, or other controlled substances of any kind and not go into, remain about or frequent places where they are dispensed or sold as a primary sale item or used unlawfully:
- 14. Submit to such breath, saliva, urine, or other chemical analysis as requested to detect the possible presence of narcotics, alcohol, or other prohibited substances.
- 15. Promptly and truthfully answer all inquiries directed to him/her by any probation of parole officer;
- 16. Attend and complete any special programs or counseling as directed by the Court or the supervising officer;

M4/452

17. Pay the following to the Clerk of this Court:

a.	Court	Costs
a.	Court	COSIS

b.	Fine	in	the	amount	of	\$	5	00	;
----	------	----	-----	--------	----	----	---	----	---

C.	Crime Victim	Compensation	Fund in	the	amount	of	\$/	100	;
----	--------------	--------------	---------	-----	--------	----	-----	-----	---

d.	Crime Lab Fee in the amount of S	made payable to	•
----	----------------------------------	-----------------	---

e.	Transportation	Costs to	County	Sheriff's Department in the amou	nt of \$	_
	•					

f.	Restitution in the amount of \$	125	; made payable to _	Datesville
				- P. S. Shika

Police Department	for crime lab fee	
Restitution in the amount of \$_	50000; made payable to	PANOLA
County Public	Defender	

g. All asses	ssments are due and payable at the rate of \$	10000 per month beginning
Wovemb	er 1, 2019 or as follows	

18. And further	
_	

Upon successful completion of the period of reporting post release supervision, the Defendant shall serve the balance of the post release supervision, on non-reporting post release supervision, and during this period, the Defendant shall comply with the following terms and conditions:

- 1. Defendant shall not unlawfully use any controlled substance.
- 2. Defendant shall not unlawfully possess any controlled substance.
- 3. Defendant shall not own, carry, or conceal a firearm.
- 4. Defendant shall not commit any crime.
- 5. Defendant shall waive extradition back to the State of Mississippi.

IT IS FURTHER ORDERED that if the Defendant fails to successfully abide by all the terms and conditions of this sentence then upon five (5) days notice to the Defendant by the District Attorney or Probation Officer of a claimed violation the Court will conduct a hearing. If the claimed violation is proven, the Court will have authority to terminate the period of post release supervision and to

174/453

incarcerate the Defendant. Procedures for termin	nation and incarceration shall be conducted in the same
manner as procedures for revocation of probation	and imposition of a suspended sentence.
This sentence imposed shall run () (concurrent) to any and all sentences previously
imposed.	
The Defendant shall be given credit for	days served in custody awaiting trial on this
charge, as by law required.	
SO ORDERED this the 17th day of 5	eptember, 2019.
	Smy McClure CIRCUIT COURT JUDGE
	ivered to the Defendant, who has been instructed
regarding same. MANA DEFENDANT	POST RELEASE SUPERVISOR DEPARTMENT OF CORRECTIONS
299-76-2867 SOCIAL SECURITY NUMBER	
3-25-1978 DATE OF BIRTH	Ohio PLACE OF BIRTH
White RACE	Male SEX
DEFENDANT'S ADDRESS 4800 Davall Rd Ashville Ohio 43/03	DEFENDANT'S TELEPHONE

74/454