



For Court Use Only (Seal)

KANSAS SENTENCING GUIDELINES JOURNAL ENTRY OF JUDGMENT
PLEASE USE FOR CRIMES COMMITTED ON JULY 1, 2023 - JUNE 30, 2024

AMENDED
(SEE PAGE 5)

SECTION I. CASE IDENTIFYING INFORMATION			1. Transaction No.	
2. STATE v. <input type="checkbox"/> Male <input type="checkbox"/> Female		3. Court O.R.I. Number		4. K.B.I. Number
5. County	6. Court Case Number	7. Sentencing Judge		8. Sentencing Date
9. Defense Counsel: <input type="checkbox"/> Appointed <input type="checkbox"/> Retained <input type="checkbox"/> Self <input type="checkbox"/> Waived Orally <input type="checkbox"/> Waived in Writing				
10. Type of Proceeding (Trial) <input type="checkbox"/> Bench Trial (includes a plea on stipulated facts) <input type="checkbox"/> Jury Trial <input type="checkbox"/> Guilty Plea <input type="checkbox"/> Nolo contendere Plea				
11. Date of Conviction:				
12. Pre-Trial Status of Offender <input type="checkbox"/> In Custody <input type="checkbox"/> Released on Bond <input type="checkbox"/> Other Release				

SECTION II. CRIMINAL HISTORY CLASSIFICATION

1. Offender's Overall Criminal History Classification as Found by the Court: A B C D E F G H I

2. Objection to Criminal History? Yes No If Yes, By: Defendant or State
 Court's Ruling on Objection: Criminal history was amended Criminal history was not amended

SECTION III. CURRENT CONVICTION INFORMATION

1. Name of PRIMARY Offense of Conviction: _____
 Count No.: _____ Date of Offense: _____ Designated by court as domestic violence case based upon special finding (see #14 this section)

2. If Drug Offense: (Indicate statute for controlled substance) 65-4105 65-4107 65-4109 65-4111 65-4113
 Name of Drug: _____
 Amount of Drug (IF Distribution Offense): _____ w/in 1,000 ft of school

3. K.S.A. Title, Section, Subsection(s): _____
 Attempt (K.S.A. 21-5301) Conspiracy (K.S.A. 21-5302) Solicitation (K.S.A. 21-5303)

4. Grade of Offense: (Check one in each row.) Felony, Severity Level _____ Misdemeanor, Class _____
 Person Nonperson

5. Offense Category: Nondrug Drug Off-grid Nongrid

6. Presumptive Sentencing Range: (Enter terms from appropriate grid.) Aggravated _____ Standard _____ Mitigated _____
 Check applicable box(es) Presumptive Prison Presumptive Probation Border Box Mandatory Prison as per K.S.A. 21-5703
 Drug Treatment for up to 18 months. K.S.A. 21-6824
 Special Rule Applies (Complete Special Rules Supplemental Page and Attach)

THIS FORM MUST BE ACCOMPANIED BY A COPY OF THE PRESENTENCE INVESTIGATION FORM PURSUANT TO K.S.A. 22-3439 AND A DOCUMENT CONTAINING INFORMATION REQUIRED BY K.S.A. 22-3426. PLEASE USE AN ADDITIONAL OFFENSES PAGE FOR ADDITIONAL OFFENSES OF CONVICTION.

Case No. _____

KANSAS SENTENCING GUIDELINES JOURNAL ENTRY OF JUDGMENT (PAGE 2)

7. **SPECIAL RULE APPLICABLE:** Yes No **If Yes, enter the number(s) and brief description(s) corresponding to the applicable special rule. (Complete Special Rules Supplemental Page and Attach):** _____

8. **SPECIAL FINDING** that the crime was **SEXUALLY MOTIVATED** pursuant to the KS Offender Registration Act
8a. Did the court make a special finding that the crime was sexually motivated? Yes No
8b. **IF YES to 8a**, did the court find that the act involved non-forcible sexual conduct, the victim was at least 14 and the offender was no more than 4 years older than the victim? (K.S.A. 22-4902(c)(19)) Yes No
8c. **IF YES to 8a and NO to 8b, PLEASE COMPLETE OFFENDER REGISTRATION SUPPLEMENT AND ATTACH IT TO JOURNAL ENTRY.**

9. Was offender determined by the Court to be an **AGGRAVATED HABITUAL SEX OFFENDER?** (K.S.A. 21-6626) Yes No
IF YES, PLEASE COMPLETE SEX OFFENSE SUPPLEMENT AND ATTACH IT TO JOURNAL ENTRY.

10. Is offender being sentenced pursuant to K.S.A. 21-6627 where offender is 18 years of age or older and the victim is less than 14 years of age? Yes No
IF YES, PLEASE COMPLETE SEX OFFENSE SUPPLEMENT AND ATTACH IT TO JOURNAL ENTRY.

11. Downward departure (K.S.A. 21-6818(a)) for a crime of extreme sexual violence (K.S.A. 21-6815)? Yes No
IF YES, PLEASE COMPLETE SEX OFFENSE SUPPLEMENT AND ATTACH IT TO JOURNAL ENTRY.

12. Did offender, as determined by the court, commit the current crime with a deadly weapon? Yes No
IF YES, PLEASE COMPLETE OFFENDER REGISTRATION SUPPLEMENT AND ATTACH IT TO JOURNAL ENTRY.

13. Was offender convicted of a violation of K.S.A. 21-5703, Manufacture or attempted manufacture; K.S.A. 21-5705(a)(1). Cultivation, Distribution, Possession w/ intent to distribute opiates, opium or narcotic drugs or any stimulant in K.S.A. 65-4107(d)(1), (d)(3), (f)(1); or K.S.A. 21-5709(a). Possession of precursors w/ intent to manufacture? Yes No
IF YES, PLEASE COMPLETE OFFENDER REGISTRATION SUPPLEMENT AND ATTACH IT TO JOURNAL ENTRY.

14. Determination of domestic violence case designation
14a. Did offender, as determined by the **trier of fact**, commit a domestic violence offense? Yes No
14b. If **YES to 14a** above, did the court find that offender had no prior domestic violence conviction or diversion, AND that offender did not use the present domestic violence offense to coerce, control or punish the victim? Yes No
14c. If **YES to 14a** and **NO to 14b**, **PLEASE CHECK THE DOMESTIC VIOLENCE CASE DESIGNATION BOX.** **DV Case**

15. U.S. Armed Forces Treatment Eligibility (K.S.A. 21-6630):
15a. Did offender serve in the armed forces of the U.S. in a combat zone as certified by the Kansas Commission on Veteran Affairs? Yes No
15b. Does offender suffer from injury and the injury is connected to service in a combat zone in the armed forces of the U.S.? Yes No
15c. Does offender's current conviction place the offender in a presumptive probation grid box? Yes No
If YES to 15a through 15c, check box if court ordered treatment: Inpatient Outpatient Gov't Provided Treatment

SECTION IV. SENTENCE IMPOSED

1. **Guideline Range Imposed:** Aggravated Standard Mitigated Departure – **COMPLETE SECTION V**

2. **Prison Term:** KDOC ____ months (including enhancement sentence)
(Enter months above then check one of the following) Prison sentence imposed or Underlying with probation granted
** or Underlying with KDOC Drug Trtmt Prog. (min. 120 days)
 Enhancement Sentence- Drug with Firearm: 6 months 18 months (K.S.A. 21-6805(g))
Ballistic Resistant Material: 30 months (K.S.A. 21-6804(t))
 Enhancement Sentence- Criminal Discharge of Firearm at Dwelling, Structure, or Vehicle- 60 months 120 months (K.S.A. 21-6804(aa)(1))
 Off-grid Crime:
 Life - Minimum 15 yrs. Life - Minimum 20 yrs. Hard 25 Hard 40 Hard 50 Life without Parole Death Penalty
 Per K.S.A. 21-6620, 21-6623 or 21-6627, if guidelines sentence greater than mandatory minimum ____ months.

3. **Postrelease Supervision Term:** 12 months 24 months 36 months 60 months (sex offense) - **COMPLETE SECTION V**
 Lifetime Postrelease (K.S.A. 22-3717(d)(1)(G)(i)) Lifetime Parole / Electronic Monitoring (K.S.A. 21-6604(r))

4. **Felony DUI:** 3rd D.U.I. 4th & Subs. D.U.I.
Jail Sentence: ____ months ____ days Release is authorized after jail service of ____ months ____ days ____ hours
 Assigned to work release (K.S.A. 21-6604(a)(11)) or House Arrest: ____ months ____ days ____ hours
 Additional one month jail if child <18 in vehicle (K.S.A. 8-1567(c) (DUI) or K.S.A. 8-2,144(c) (Comm. DUI) (include in total))

5. **Other Nongrid Felony and/or Misdemeanors:** 3rd & Subs. Domestic Battery w/in 5 yrs. Animal Cruelty
 Jail Sentence Imposed: ____ months ____ days ____ hours **Probation Imposed** (Complete # 6)
 Probation granted after serving jail term. Jail Term: ____ months ____ days
 Assigned to work release (K.S.A. 21-6604(a)(11)) or House Arrest: ____ months ____ days ____ hours

Case No. _____

KANSAS SENTENCING GUIDELINES JOURNAL ENTRY OF JUDGMENT

(PAGE 3)

6. **Probation Term (If Granted):** 12 months 18 months 24 months 36 months 60 months
 Drug Treatment for up to 18 months. K.S.A. 21-6824 Other: _____ Specialty Court: _____
 Extended Period K.S.A. 21-6608(c)(5) for: _____ months
Probation Supervision to: Court Services Community Corrections Unsupervised
County Jail Time Imposed AS A CONDITION OF PROBATION: _____ days
Comments: _____

SECTION V. DEPARTURE INFORMATION

1. **Type of Departure:** (Check all that apply.)
 Downward Durational Upward Durational Downward Dispositional Upward Dispositional
 Postrelease Supervision (up to 60 months for sexually motivated offense) – K.S.A. 22-3717(d)(1)(D)(i)

2. **Reasons Cited as Basis for Departure:**

SECTION VI. OTHER CONDITIONS

1. **General/Special Conditions of Probation (COMPLETE AND ATTACH ORDER OF PROBATION TO THIS JOURNAL ENTRY if needed)**

2. **Costs Ordered:**

†Total Restitution (please complete #3 and #4 below)	\$ _____	Children’s Advocacy Center Assessment Fee	\$ _____
KBI and Other Lab Fees	\$ _____	BIDS Attorney Fee <input type="checkbox"/> Waived	\$ _____
Court Costs (including surcharge)	\$ _____	BIDS Application Fee	\$ _____
* Fines to Human Trafficking Victim Assist. Fund	\$ _____	Booking/Fingerprint Fee	\$ _____
*Total Fines (excluding Human Trafficking Victim Assist. Fund)	\$ _____	SB 123 Assessment Fee (\$175)	\$ _____
DNA Database Fee (K.S.A. 21-2511 & 75-724.)	\$ _____	SB 123 Offender Reimbursement (at least \$125)	\$ _____
Domestic Violence Special Program Fee	\$ _____	Other Fees: (Lab, Medical, Witness, Court-Appointed Attorney etc.)	\$ _____
Alcohol and/or Drug Eval. Fee (offenses before 7/1/11)	\$ _____	Specify: _____ _____ _____ _____	\$ _____
Domestic Violence Assessment/Recommendations	\$ _____		\$ _____
Community Corr. Fee Collected by Community Corr.	\$ _____		\$ _____
Correctional Supv. Fee (Felony \$120; Misd. \$60)	\$ _____		\$ _____
			TOTAL COSTS:

† Restitution shall be ordered as per K.S.A. 22-3424 if convicted of Human Trafficking (K.S.A. 21-5426), Agg. Human Trafficking (K.S.A. 21-5426) or Commercial Exploitation of a Child (K.S.A. 21-6422).
* \$250 of DUI fine shall be sent to Community Corrections Supervision Fund.
* Fines to Human Trafficking Assistance Fund: \$2500-5000 for Human Trafficking (K.S.A. 21-5426), Promoting the Sale of Sexual Relations (K.S.A. 21-6420) or Commercial Sexual Exploitation of a Child (K.S.A. 21-6422); no less than \$5000 for Agg. Human Trafficking (K.S.A. 21-5426); and one-half of \$1200-5000 for Buying Sexual Relations (K.S.A. 21-6421).

3. **Restitution to be paid at a rate of \$ _____ per _____ for _____ ; or**

Restitution unworkable in whole or part Explain in detail (K.S.A. 21-6604(b)(1)): _____

4.	Amount	Name and Address
\$		
\$		
\$		
\$		

Case No. _____

KANSAS SENTENCING GUIDELINES JOURNAL ENTRY OF JUDGMENT

(PAGE 4)

SECTION VII. RECAP OF SENTENCE

1. Sentence Imposed:

Total Prison Term (if sentence imposed is to prison): _____

Off Grid Term _____ + _____ months

Total County Jail Term: _____ Consecutive to Prison Term

Total Underlying Jail Term (if sentence imposed is probation): _____

Total Underlying Prison Term (if sentence imposed is probation): _____

For each count, the Court pronounced the complete sentence, including the maximum potential good time percentage. K.S.A. 21-6804(e)(2) and 21-6805(c)(2).

2. Postrelease Supervision Term: 12 months 24 months 36 months 60 months

Lifetime Postrelease (K.S.A. 22-3717(d)(1)(G)(i)) Lifetime Parole / Electronic Monitoring (K.S.A. 21-6604(r))

3. Probation Term Imposed (select one): 12 months 18 months 24 months 36 months 60 months

Drug Treatment for up to 18 months. K.S.A. 21-6824

Specialty Court: _____

Extended Period K.S.A. 21-6608(c)(5) for: _____ months

Other:

4. Incarceration Credit: Enter dates (mm/dd/yy ONLY) and days of credit potentially for this case and check "A" if the days are awarded, or "N" if the days are not awarded by the court. (attach additional pages if necessary)

*Location	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N	*Location-	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N
*Location	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N	*Location-	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N
*Location	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N	*Location-	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N
*Location	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N	*Location-	From:	To:	=	Days	<input type="checkbox"/> A	<input type="checkbox"/> N

* Enter appropriate letters to indicate the type of location where credit may have been earned:

J=Jail TL=Treatment (Locked) TU=Treatment (Unlocked) RL=Residential (Locked) RU=Residential (Unlocked) HA= House Arrest

Sentencing Date: _____ Total number of days of credit actually awarded _____ = Sentencing Begins Date: _____

5. Prior Case(s) to Which the Current Sentence is to Run Concurrent or Consecutive:

Case No.	<input type="checkbox"/>	Misd	<input type="checkbox"/>	Felony	County	Concurrent	<input type="checkbox"/>	Or Consecutive	<input type="checkbox"/>
Case No.	<input type="checkbox"/>	Misd	<input type="checkbox"/>	Felony	County	Concurrent	<input type="checkbox"/>	Or Consecutive	<input type="checkbox"/>
Case No.	<input type="checkbox"/>	Misd	<input type="checkbox"/>	Felony	County	Concurrent	<input type="checkbox"/>	Or Consecutive	<input type="checkbox"/>
Case No.	<input type="checkbox"/>	Misd	<input type="checkbox"/>	Felony	County	Concurrent	<input type="checkbox"/>	Or Consecutive	<input type="checkbox"/>

Others:

6. Miscellaneous Provisions:

Defendant informed of right to appeal within 14 days of this date. K.S.A. 22-3608(c). (Required by case law)

Defendant informed of potential rights of expungement. K.S.A. 21-6614(j)

Defendant informed of duty to register as an offender pursuant to the Kansas Offender Registration Act. K.S.A. 22-4904(a)(1).

(Please complete OFFENDER REGISTRATION SUPPLEMENT and attach it to the Journal Entry.)

Defendant must submit specimens of blood or an oral or other biological sample, if not previously submitted, pursuant to K.S.A. 21-2511(c).

Defendant must obtain psychological evaluation and shall complete the recommended treatment pursuant to K.S.A. 22-3717(d)(1)(D)(iv).

Defendant has been processed, fingerprinted and palmed. K.S.A. 21-2501(b)

Court remands Defendant to custody of Sheriff to begin serving sentence.

Court remands Defendant to custody of Sheriff to await transportation to the custody of the Secretary of Corrections.

Defendant to report to County Jail on the ____ day of _____, 20__ at ____ o'clock a.m. p.m. to start serving sentence.

House arrest is authorized for remaining _____ days after Defendant completes mandatory _____ hours in the County Jail.

Work release recommended (if accepted, defendant is to abide by recommendations of the program).

Defendant's financial resources and burden imposed by payment of a fine considered by the court pursuant to K.S.A. 21-6612(c).

Defendant's financial resources and burden imposed by BIDS application and attorney fees considered by the court pursuant to K.S.A. 22-4513 and *State v. Robinson*, 281 Kan. 538, 132 P.3d 934 (2006).

Defendant to undergo domestic violence assessment pursuant to K.S.A. 21-6604(p).

Defendant advised of prohibition against firearms.

Other Comments:

Case No. _____

SECTION VII. RECAP OF SENTENCE CONTINUED

(PAGE 5)

7. Border Box Findings K.S.A. 21-6804(f): (Check if appropriate)

- An appropriate treatment program exists which is likely to be more effective than the presumptive prison term in reducing the risk of offender recidivism; and
- the recommended treatment program is available, and the offender can be admitted to the program within a reasonable period of time; or,
- the non-prison sanction will serve community safety interests by promoting offender reformation

8. If made, Motion for New Trial: Granted Denied

9. If made, Motion for Judgment of Acquittal: Granted Denied

10. If made, Motion for Arrest of Judgment: Granted Denied

11. KBI Reporting Information: Firearms Special Rule Finding by the Court – Count #(s) _____
 Domestic Violence Designation – Count #(s) _____

12. Additional Comments:

13. If Amended, indicate changes made:

SECTION VIII. SIGNATURES

1. Judge's Signature: _____ **Date:** _____
Signed: _____
Printed: _____
 Submitted for Electronic Signature
Email Address: _____

2. Prosecuting Attorney:
Signed: _____
Printed: _____
Supreme Court Number: _____
Date: _____
Address: _____

Phone No: _____
Email Address: _____

3. Defense Attorney:
Signed: _____
Printed: _____
Supreme Court Number: _____
Date: _____
Address: _____

Phone No: _____
Email Address: _____