

IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
UNIFORM CONDITIONS OF SUPERVISED PROBATION

Clerk of the Superior Court
*** Electronically Filed ***
COC Auto-Accept
10/19/2022 10:57:00 AM
Filing ID 15009879

State of Arizona

VS.

Melissa Suzanne Diegel

MARICOPA COUNTY DIVISION: CRJ20

CR2019-001522-001 DT

OFFENSES:

Count 002 ARS §13-3623A2 CHILD/VUL ADULT ABUSE- F3
INTENT

The Court is suspending imposition or execution of sentence and, under the supervision of the Adult Probation Department (APD),

PLACING the defendant on probation for a period of **10.00** Years
to begin on **10/19/2022**

I AGREE TO THE FOLLOWING AS CONDITIONS OF THE SUSPENSION OR THE IMPOSITION OR EXECUTION OF SENTENCE (Conditions Checked Also Apply)

LAW ABIDING BEHAVIOR

1. I will maintain a crime-free lifestyle, by obeying all laws, and not engaging or participating in any criminal activity.
2. I will not possess or control any stun guns, tasers, firearms, ammunition, deadly, or prohibited weapons as defined in A.R.S. §13-3101.
3. I will report any contact I have with law enforcement to the APD within 72 hours.
4. I will submit to search and seizure of person and property by the APD without a search warrant.
5. If deported or processed through voluntary departure, I will not return to the United States without legal authorization during the term of my probation. If I am deported or processed through voluntary departure, all conditions remain in effect.

REPORTING TO APD

6. I will report to the APD within 72 hours of sentencing, absolute discharge from prison, release from incarceration, or residential treatment and continue to report as directed. I will also keep APD advised of progress toward case plan goals and comply with any written directive of the APD to enforce compliance with the conditions of probation. I will provide a sample for DNA testing if required by law.

RESIDENCE

7. I will provide the APD safe, unrestricted access to my residence and receive prior approval of the APD before changing my residence. I will reside in a residence approved by the APD.
8. I will request and obtain written permission of the APD prior to leaving the state.
10. I may apply for an Inter-County transfer and will not proceed to that County until APD issues written authorization.

TREATMENT/BEHAVIOR CHANGE/PRO-SOCIAL ACTIVITIES

11. I will actively participate and cooperate in any program of counseling or assistance as determined by APD, or as required by law, given assessment results and/or my behavior. I will sign any release or consent required by the APD so the APD can exchange information in relation to my treatment, behavior and activities.
12. I will not possess or use illegal drugs or controlled substances and will submit to drug and alcohol testing as directed by the APD.
13. I will obtain written approval of the APD prior to associating with anyone I know who has a criminal record. I will not knowingly associate with any person engaged in criminal behaviors.
14. I will seek, obtain, and maintain employment, if legally permitted to do so, and/or attend school according to my case plan with the APD. I will inform the APD of any changes within 72 hours.
15. I will be financially responsible by paying all restitution, fines, and fees in my case as imposed by the Court. I understand, if I do not pay restitution in full, the Court may extend my probation.

**IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
UNIFORM CONDITIONS OF SUPERVISED PROBATION**

State of Arizona

VS.

Melissa Suzanne Diegel

**MARICOPA COUNTY DIVISION: CRJ20
CR2019-001522-001 DT**

21. I will abide by the attached special conditions of probation:
 - Domestic Violence

22. Defendant shall pay restitution for all economic loss to all victims. Defendant's contact with each victim shall be at the discretion of each victim independently. APD shall not interfere with victim A and B's contact with the Defendant.

Based upon the defendant's agreement to abide by the Conditions of Supervision set forth, above, as well as my review and approval of such conditions, I hereby impose and order that these conditions are in effect, and the defendant shall comply with said conditions.



Hon. Michael C Blair
MARICOPA COUNTY SUPERIOR COURT

10/19/2022
Date

RECEIPT AND ACKNOWLEDGMENT: *I acknowledge receipt of the conditions of probation and any attachments added. I understand that by not abiding by the conditions of probation my probation could be revoked and the Court may sentence me in accordance with the law. In addition, I waive extradition for any probation revocation proceedings in this matter.*



Defendant

10/19/2022
Date

Address **Apt.** **City** **State** **Zip** **Phone**

IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
SPECIAL CONDITIONS OF PROBATION

State of Arizona

MARICOPA COUNTY DIVISION: Maricopa

CRJ20

VS. Melissa Suzanne Diegel

CASE: CR2019-001522-001 DT Cnt 002

Pursuant to Uniform Condition 21:

Domestic Violence

1. I will participate, cooperate in and successfully complete the Domestic Violence Court Program to include abiding by all Domestic Violence Court program orders or contracts that may be provided in writing at future court hearings.
2. I will abide by and comply with all APD behavior agreements.
3. I will not contact or attempt to contact the victim(s) or the family of the victim(s) in person, through mail or electronic or telephonic means, or through third parties without the prior written approval of the Court or the APD.
4. I will obtain prior written approval of the APD before entering into the premises, traveling past or being near where the victim and/or family of the victim resides, works or frequents.
5. I will immediately report to the APD any unapproved contact initiated by the victim.
6. I will immediately report contact with any Court including the filing of and/or the service of any Court document(s) to the APD.
7. I will comply with all Court orders including, but not limited to, orders of protection and Family Court orders.
8. I will participate in and successfully complete domestic violence counseling as approved by the APD. I will obtain prior written approval of the APD before making any changes in treatment or treatment providers.
9. I will submit to any program of psychological or physiological assessment at the direction of the APD to assist in treatment, planning, and case monitoring.
10. I will notify the APD of any intimate, romantic or domestic partner relationship(s). In addition, I will inform my partner(s) as to why I am under probation supervision.
11. I will abide by any curfew imposed by the APD.
12. I will not threaten, intimidate, harass or stalk anyone, including APD staff.
13. I may serve up to 120 days in the Maricopa County Jail as specified at a future Court hearing.
14. If GPS is ordered in my case, I will be financially responsible for the costs of GPS monitoring, and lost or damaged equipment.
15. Other: Defendant's contact with each victim shall be at the discretion of each victim independently.

RECEIPT AND ACKNOWLEDGMENT: I acknowledge receipt of the Special Conditions of Probation. I understand that by not abiding by the Conditions of Probation my probation could be revoked and the Court may sentence me in accordance with the law.



Defendant

10/19/2022
DATE



Hon. Michael C Blair 10/19/2022
DATE
MARICOPA COUNTY SUPERIOR COURT