

**DISPOSITION SHEET**  
**GENESEE COUNTY PROBATION DEPARTMENT**  
County Building #1, 15 Main Street, Batavia, New York 14020-2136  
(585) 344-2550

Order of \_\_\_\_\_ Court

**Docket/SCI/Indictment No.:** \_\_\_\_\_

**Defendant,** \_\_\_\_\_ **DOB:** \_\_\_\_\_ , of

Address \_\_\_\_\_

Social Security No.: \_\_\_\_\_

having been convicted of \_\_\_\_\_

is hereby sentenced to the following - (CHECK & FILL WHERE APPROPRIATE)

**DISPOSITIONAL ALTERNATIVES** – Date imposed: \_\_\_\_\_

- Youthful Offender (720.10, 720.20 CPL)
- Conditional Discharge (65.05-1, 3(b) & 60.01-2(c) (d) PL)      Unconditional Discharge (65.20-1 PL)
- Probation (65.00-1,2,3, 60.01-29 ( c)(d) PL) \_\_\_\_\_ years
- Incarceration \_\_\_\_\_ (70-15-1,2,3, & 85.00-2a, 3 PL)
- Probation Revocation

**NOTE:** *If this is a Leandra Law Case and Probation is Revoked after Conviction, the Court Must Indicate Resentence to:*      Jail and Conditional Discharge with IID     or      Jail and \_\_\_\_\_ years Probation with IID

Fine of \$ \_\_\_\_\_ payable to \_\_\_\_\_ (Court/Probation) at the rate of \_\_\_\_\_ at the rate of \_\_\_\_\_  
(80.05-L, 60.01-2 ( c), 3 (b) (c) PL)     Commencing \_\_\_\_\_

Restitution/Reparation through Probation Department in the amount of \$ \_\_\_\_\_ plus a (5%) surcharge of \$ \_\_\_\_\_ , totaling \$ \_\_\_\_\_

The total amount is payable as follows:

- In a lump sum by the date of \_\_\_\_\_
- In monthly installments of \$ \_\_\_\_\_ , beginning on \_\_\_\_\_ to be fully paid by \_\_\_\_\_
- Other: \_\_\_\_\_  
(420.10 CPL & 65.10-2 (f) PL)
- To be reduced by co-defendant (s) \_\_\_\_\_

Granted Relief of Civil Disabilities (Check Yes or No)      Yes      No

Victim/beneficiary of Restitution/Reparation:

Name : \_\_\_\_\_ Name : \_\_\_\_\_ Name : \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_ Address: \_\_\_\_\_

Amount: \_\_\_\_\_ Amount: \_\_\_\_\_ Amount: \_\_\_\_\_

Ordered by Hon: \_\_\_\_\_

(Signature)