

**KANSAS SENTENCING GUIDELINES  
PRESENTENCE INVESTIGATION REPORT  
FACE SHEET  
PLEASE USE FOR CRIMES COMMITTED ON  
JULY 1, 2020 - JUNE 30, 2021**

Original  Amended

1. Judicial District: \_\_\_\_\_

County and ORI number : \_\_\_\_\_

Case Number: \_\_\_\_\_  DV Case

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

A/K/A's: \_\_\_\_\_

Age: \_\_\_\_ K.B.I. No: \_\_\_\_\_

Sex:  Male  Female

Race:  W  B  A.I.  A

Ethnicity:  Hispanic  Non-Hispanic

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

\_\_\_\_\_

Citizenship:  U.S.  Citizen of: \_\_\_\_\_

Detainer or Other Charges Pending?  Yes  No

Subject in Custody Awaiting Sentencing?  Yes  No

Begin \_\_\_\_\_ End \_\_\_\_\_ = \_\_\_\_\_ Days

Begin \_\_\_\_\_ End \_\_\_\_\_ = \_\_\_\_\_ Days

Begin \_\_\_\_\_ End \_\_\_\_\_ = \_\_\_\_\_ Days

DNA Sample Taken (K.S.A. 21-2511):  Yes  No

2. IF OFFENDER WAS UNDER 18 YEARS OF AGE WHEN CRIME(S) WAS COMMITTED AND WAS TRIED AS AN ADULT, OFFENDER WAS:

- Adjudicated as an Adult Under K.S.A. 38-2347
- Automatically Considered Adult Because of a Prior Felony

3. Names of Co-Defendants, if any: \_\_\_\_\_

4. Defense Attorney: \_\_\_\_\_

Type of Counsel Prior to Sentencing:

- Retained  Appointed  Self
- Waived Orally  Waived in Writing

Prosecuting Attorney: \_\_\_\_\_

Sentencing Judge: \_\_\_\_\_

Date of Guilty Plea or Judgment: \_\_\_\_\_

Date of Sentencing: \_\_\_\_\_

5. Presentence Investigator: (Please Print)

Date Assigned: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Presentence Investigator's signature: \_\_\_\_\_

6. Primary Offense: \_\_\_\_\_

- Attempt  Conspiracy  Solicitation

K.S.A. No. (including subsections): \_\_\_\_\_

Offense Date: \_\_\_\_\_ Count No.: \_\_\_\_\_

Offender Registration Required - Attach Supplement (Pg 8)  
(K.S.A. 22-4902)

Criminal History Score: \_\_\_\_\_

- Person  Nonperson
- Misdemeanor - Class \_\_\_\_\_
- Felony:  On-Grid - Severity Level \_\_\_\_\_  Nondrug  Drug
- Off-grid  Nongrid (K.S.A. 21-6804(i))

If Grid Sentence:  Mandatory Prison as per K.S.A. 21-5703  
 Presumptive Prison  Presumptive Prison per Special Rule  
 Presumptive Probation  Border Box

Range: Aggravated \_\_\_\_ Standard \_\_\_\_ Mitigated \_\_\_\_

Max. Good Time: (K.S.A. 21-6821)  15%  20%

Special Rules:  Special Rule Applies - Attach Supplement (Pg 6)  
Number \_\_\_\_\_ and Description: \_\_\_\_\_

If Drug Offense (Indicate statute for controlled substance):

- 65-4105  65-4107  65-4109  65-4111  65-4113

Name of Drug: \_\_\_\_\_

Amount: (Distribution Only) \_\_\_\_\_  w/in 1,000 ft of school

- Firearm Finding (K.S.A. 21-6805(g)):  6 months
- 18 months

Drug Treatment:  Mandatory  With Court Finding

Not Eligible:  Criminal History  Residency

3<sup>rd</sup> or Subsequent Conviction Felony Possession

Low or Low-Moderate LSI-R score

Low SASSI score

Postrelease Supervision Duration:  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))

Probation Duration:  12 months  18 months  24 months

36 months  Other: \_\_\_\_\_

DUI Post-Imprisonment Supervision: (12 months)

- Court Services  Community Corrections
- Additional one month jail if child <18 in vehicle

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PRESENTENCE INVESTIGATION REPORT - FACE SHEET SUPPLEMENTAL PAGE

CASE NO. \_\_\_\_\_

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Additional Offense: \_\_\_\_\_

K.S.A. No. (including subsections): \_\_\_\_\_

Offense Date: \_\_\_\_\_ Count No.: \_\_\_\_\_

Offender Registration Required - Attach Supplement (Pg 8)  
(K.S.A. 22-4902)

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PRESENTENCE INVESTIGATION REPORT  
CURRENT OFFENSE INFORMATION

(This page only - NOT PUBLIC RECORD)

CASE NO. \_\_\_\_\_

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1. OFFICIAL VERSION:

2. DEFENDANT'S VERSION: Defendant's Date of Birth: \_\_\_\_\_ Defendant's Social Security Number: \_\_\_\_\_

3. VICTIM'S INJURY / DAMAGE / STATEMENT(S):

| 4. RESTITUTION OWED TO: |                  | Total Restitution Owed: \$ _____ |
|-------------------------|------------------|----------------------------------|
| Amount                  | Name and Address |                                  |
| \$ _____                | _____            |                                  |
| \$ _____                | _____            |                                  |
| \$ _____                | _____            |                                  |
| \$ _____                | _____            |                                  |
| \$ _____                | _____            |                                  |
| \$ _____                | _____            |                                  |
| \$ _____                | _____            |                                  |

5. DEFENDANT'S FINANCIAL INFORMATION:

Is defendant employed?  Yes  No If so,  Full time  Part time

Does the defendant collect disability or any type of assistance?  Yes  No Amount per month \$ \_\_\_\_\_

Number of dependents: \_\_\_\_\_

Monthly household income: \$ \_\_\_\_\_

Estimated amount of bills per month: \$ \_\_\_\_\_

6. **PLACEMENT OPTIONS:** This is a list of placement options and the presentence investigator's professional assessment of possible conditions should the court place the offender on probation or order some form of community sanction.

- COMMUNITY CORRECTIONS [Indicate the criteria from K.S.A. 75-5291 or Special Rule that qualifies the defendant for placement in Community Corrections.]
  - (a)(2)(A) Scored moderate, high or very high risk
  - (a)(2)(B) Downward dispositional departure from presumptive prison sentence
  - (a)(2)(C) Convicted of offense severity level 7 or higher which requires registration
  - (a)(2)(F) Drug Treatment for up to 18 months (K.S.A. 21-6824 "SB 123")
  - (a)(2)(G) Sentenced pursuant to K.S.A. 8-1567 (DUI)
  - Special Rule Applies
- COURT SERVICES

7. **OFFICER'S ASSESSMENT OF CONDITIONS OF PROBATION:** K.S.A. 21-6607 [Check All That Apply.]

- Alcohol evaluation  Drug evaluation  Mental Health evaluation  ADSAP Evaluation  Domestic Violence Offender Assessment (K.S.A. 21-6604(p))
- In Patient  Out Patient
  - Alcohol treatment  Drug treatment  Mental Health treatment (Follow recommendations of counselor)
- No possession or consumption of alcohol or illegal drugs
- At C.S.O. request and at defendant's own expense, submit to random:  Breath test  Blood test  Urinalysis test
- Community Service Work: \_\_\_\_\_ Hours
- Gain employment  Maintain employment
- Notify the C.S.O. of changes in employment, residence and phone number
- No contact with:  Victim  Co-defendant
- Educational program:  G.E.D.  Vocational  Higher Education
- Register as an offender pursuant to the Kansas Offender Registration Act, K.S.A. 22-4901 *et. seq.* (**NO registration is required** for K.S.A. 21-5705(a)(2)-(a)(6) and **ALL** subsections)
- Attend a presentation by the Victim Impact Panel
- Submit to KBI DNA testing and be responsible for the cost of the test
- Curfew Restriction: \_\_\_\_\_
- Travel Restriction: \_\_\_\_\_
- Other: \_\_\_\_\_

8. **COSTS PROPOSED:**

|  |          |   |                 |
|--|----------|---|-----------------|
| †Total Restitution (Please complete pg. 4 item #4)             | \$ _____ | Children's Advocacy Center Assessment Fee                           | \$ _____        |
| KBI or Other Lab Fees  | \$ _____ | BIDS Attorney Fee   | \$ _____        |
| 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.) | \$ _____        |
| Domestic Violence Assessment/Recommendations                   | \$ _____ | Specify: _____  | \$ _____        |
| Community Corrections Fee                                      | \$ _____ |   | \$ _____        |
| Correctional Supv. Fee (Felony \$120/ Misd. \$60)              | \$ _____ |   | \$ _____        |
|  |          |   | \$ _____        |
|  |          |   | \$ _____        |
|  |          |   | \$ _____        |
|  |          | <b>TOTAL COSTS:</b>   | <b>\$ _____</b> |

- †  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).