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Peter J. Lucido  
 Macomb County Prosecutor  
 4th Floor  
 1 South Main  
 Mount Clemens, MI 48043-2375

**Re: Policy Deviation Request**

Dear Prosecutor Lucido:

This is an offer to compromise and negotiate under MRE 408. This is a policy deviation request to the Macomb County Prosecutor’s Office for a plea regarding:

<b>Case title</b>	People v
<b>Case number</b>	
<b>Court</b>	
<b>Judge</b>	
<b>Next court event and date (if any)</b>	

<b>Offense Location</b> (city, township or village)	
<b>Offense Date(s)</b>	
<b>Officer in Charge</b>	

**Type of charge:**

- District Court misdemeanor       District Court felony requesting misdemeanor  
 General District Court       General Circuit Court       OWI 3rd  
 Special Unit (not capital, death or major assault)  
 Special Unit (with capital, death or major assault)

<b>Defense attorney name</b>	
<b>Defense attorney P#</b>	
<b>Defense attorney phone</b>	
<b>Defense attorney email</b>	
<b>Defense law firm name</b>	
<b>Defense attorney address</b>	

<b>Brief Summary of the facts of the case</b>

**Pending charges:**

Count #	PACC Code	Felony or Misd	Pending Count's Title
1			
2			
3			
4			
5			
6			
7			

Sentencing guidelines, if convicted on pending charges

**Specific deviation result requested (*required*)**

Count #	PACC Code	Felony or Misd	Deviation Count's Title
1			
2			
3			
4			
5			
6			
7			

**Sentencing guidelines, if convicted on requested deviation**

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**Defendant's efforts at rehabilitation during pendency of case, if any**

(Examples may include: anger management, evaluation/counseling, substance abuse evaluation, documentation as to AA NA attendance or other counseling, etc.)

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**Defendant's status on date of offense**

On bond                       Probation                       Parole  
 Other \_\_\_\_\_

**Summary of relevant criminal history**

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**Treatment Court, if attending**

None                       Drug Court                       Mental Health Court  
 Veterans Court                       Other \_\_\_\_\_

**Brief summary of reason for requesting deviation**

I acknowledge this request will become part of the Prosecutor's Office file and might be subject to court disclosure, or Freedom of Information Act Requests, or might otherwise be disclosed as permitted by law.

Sincerely,

<b>Attorney Signature</b>	
<b>Attorney Name</b>	
<b>P Number</b>	
<b>Law Firm Name</b>	
<b>Mailing Address</b>	
<b>Phone</b>	
<b>Email</b>	

<b>Attachments:</b>