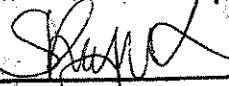


Certified True Copy

By   
Virginia Board of Nursing



RECEIVED

SEP 25 2013

VA BD OF NURSING

COMMONWEALTH of VIRGINIA

Dianne L. Reynolds-Cane, M.D.  
Director

Department of Health Professions

Perimeter Center  
9960 Mayland Drive, Suite 300  
Henrico, Virginia 23233-1463

www.dhp.virginia.gov  
TEL (804) 367-4400  
FAX (804) 527-4475

September 25, 2013

Elizabeth Lynne Brown  
16294 Mary Street  
Abingdon, VA 24210

CERTIFIED MAIL

DUPLICATE COPY  
VIA FIRST CLASS MAIL

RE: License No.: 0001-231028

DATE 9/25/13

Dear Ms. Brown:

Pursuant to Section 54.1-2409 of the Code of Virginia (1950), as amended, ("Code"), you are hereby given notice that your license to practice nursing in the Commonwealth of Virginia has been mandatorily suspended by the enclosed Order entered September 25, 2013. You are hereby advised that, pursuant to Section 54.1-2409.1 of the Code, any person who practices a profession or occupation after having their license or certificate to do so suspended shall be guilty of a felony. Please return your license to Jay P. Douglas, Executive Director of the Virginia Board of Nursing, at the above address, immediately upon receipt of this letter.

Section 54.1-2409 of the Code further provides that you may apply to the Board of Nursing ("Board") for reinstatement of your license, and shall be entitled to a hearing not later than the next regular meeting of the Board after the expiration of sixty days from the receipt of such reinstatement application. You have the following rights, among others: to be represented by legal counsel, to have witnesses subpoenaed on your behalf, to present documentary evidence and to cross-examine adverse witnesses. The reinstatement of your license shall require the affirmative vote of three-fourths of the members present of the Board of Nursing.

Should you wish to petition the Board of Nursing for reinstatement of your license, contact Jay P. Douglas, Executive Director, at the above address or (804) 367-4599.

Sincerely,

Dianne L. Reynolds-Cane, M.D., Director  
Department of Health Professions

cc: E. Lynn Dougherty, Esquire  
Enclosures  
Case # 152232

**VIRGINIA:**

**BEFORE THE DEPARTMENT OF HEALTH PROFESSIONS**

**IN RE: ELIZABETH LYNNE BROWN, R.N.  
License No.: 0001-231028**

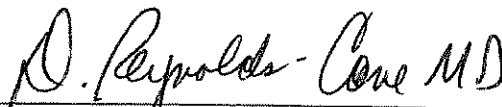
**ORDER**

In accordance with Section 54.1-2409 of the Code of Virginia (1950), as amended, ("Code"), I, Dianne L. Reynolds-Cane, M.D., Director of the Virginia Department of Health Professions, received and acted upon evidence that Elizabeth Lynne Brown, R.N., pled guilty to and was found to be guilty of felony charges in the Criminal Court for the County of Sullivan, Tennessee, to wit: Thirty-Five (35) Counts of Obtaining Controlled Substance by Fraud. Certified copies of the Judgments are attached to this Order and are marked as Commonwealth's Exhibit No. 1.

WHEREFORE, by the authority vested in the Director of the Department of Health Professions pursuant to Section 54.1-2409 of the Code, it is hereby ORDERED that the license of Elizabeth Lynne Brown, R.N., to practice nursing in the Commonwealth of Virginia be, and hereby is, suspended.

Upon entry of this Order, the license of Elizabeth Lynne Brown, R.N., will be recorded as suspended and no longer current. Should Ms. Brown seek reinstatement of her license pursuant to Section 54.1-2409 of the Code, she shall be responsible for any fees that may be required for the reinstatement and renewal of her license prior to issuance of her license to resume practice.

Pursuant to Sections 2.2-4023 and 54.1-2400.2 of the Code, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record and shall be made available for public inspection and copying upon request.



\_\_\_\_\_  
Dianne L. Reynolds-Cane, M.D., Director  
Department of Health Professions

ENTERED: \_\_\_\_\_

9-25-13



# COMMONWEALTH of VIRGINIA


Dianne L. Reynolds-Cane, M.D.  
Director

*Department of Health Professions*  
Perimeter Center  
9960 Mayland Drive, Suite 300  
Henrico, Virginia 23233-1463

www.dhp.virginia.gov  
TEL (804) 367-4400  
FAX (804) 527-4475

## CERTIFICATION OF DUPLICATE RECORDS

I, Dianne L. Reynolds-Cane, M.D., Director of the Department of Health Professions, hereby certify that the attached Judgments dated September 5, 2013, regarding Elizabeth Lynne Brown, R.N., are true copies of the records received from the Criminal Court for the County of Sullivan, Tennessee.

  
\_\_\_\_\_  
Dianne L. Reynolds-Cane, M.D.

Date: 9-25-13

**MINUTES the 5<sup>th</sup> of September, 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 1 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUI Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/05/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense .methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Concurrent with: _____ Consecutive to: _____	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ <u>1500.00</u> Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State <b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Weeks
--	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA testing.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.  
*Continue in health monitoring program through St of VA or other program*  
*Not practice or be employed in any capacity where controlled substances dispensed.*

ROBERT H. MONTGOMERY JR. \_\_\_\_\_ Date of Entry of Judgment \_\_\_\_\_  
 Judge's Name Judge's Signature  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)

FILED  
 2013 SEP - 5 AM 9:38  
 EDWIN R. KERNES  
 CLERK  
 SULLIVAN CO., TN  
 COMMONWEALTH'S EXHIBIT 1  
 6889-100-008 (0/05)

**MINUTES the 5<sup>th</sup> of September 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 2 Counsel for the State: JOSEPH E. PERIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>07/5/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	From _____ to _____  From _____ to _____  From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Restitution: Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.  
 See ct #1

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TO BE BY R. KERNS, CLERK OF COURT  
 SULLIVAN CO., TN  
 2013 SEP - 8 AM 9:37  
 FILED

**MINUTES the 5th of September 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 3 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee  Retained  Pub Def Appt  Private Atty Appt  
 vs.  Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County \_\_\_\_\_ if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Indictment Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/10/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
		<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	
		Consecutive to: Count # 1	

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Sex Offender Tax	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	---	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

2013 SEP -5 AM 10:07  
 FILED  
 CLERK OF COURT  
 SULLIVAN COUNTY, TN

MINUTES the 5th of September 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number:            S62163                      Count:            4                      Counsel for the State:            JOSEPH E. PERRIN  
 Judicial District:            2<sup>nd</sup>                      Judicial Division:            Criminal I                      Counsel for the Defendant:            E. LYNN DOUGHERTY  
 State of Tennessee                       Retained     Pub Def Appt     Private Atty Appt  
 vs.                       Counsel Waived     Pro Se  
 Defendant:            ELIZABETH BUFFORD                      Alias:                                 Date of Birth:                                 Sex:            Female  
 Race:            White                      SSN:                                 Driver License #:                                 Issuing State:             
 State ID #:                                 County Offender ID # (if applicable):                                 TOMIS/TDOC #:             
 Relationship to Victim:                                 Victim's Age:             
 State Control #:                                 Arrest Date:                                 Indictment Filing Date:            3/27/2013

**JUDGMENT**                       Original                       Amended                       Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the            6<sup>th</sup> day of            June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty – Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one)    1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>          </u> AND TCA §: <u>          </u> 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD Amended Offense Name <u>          </u> AND TCA §: <u>          </u> Offense Date: <u>          </u> 07/10/2012                      County of Offense: <u>          </u> SULLIVAN Conviction Offense Name <u>          </u> AND TCA §: <u>          </u> 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD Conviction: Class (circle one)    1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>          </u> 8-29-13
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Mitigated 30% <input type="checkbox"/> Multiple Rapist 100% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Career 60% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Repeat Viol 100% <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
		Consecutive to: Count # 1	

Sentenced To:     TDOC                       County Jail                       Workhouse

Sentence Length:            3 Years                      Months                      Days                      Hours                       Life     Life w/out Parole     Death

Mandatory Minimum Sentence Length:            39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or            55-10-401 DUI 4<sup>th</sup> Offense or            39-17-1324 Possession/Employment of Firearm or            40-39-208, -211 Violation of Sex Offender Registry

Period of incarceration to be served prior to release on probation or Community Corrections:            Months                      Days                      Hours

Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs:            % (Misdemeanor Only)

Alternative Sentence:     Sup Prob     Unsup Prob     Comm Corr (CHECK ONE BOX)               3 Years                      Months                      Days

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?     Yes     No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF                      \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours                      Days                      Weeks                      Months
--	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.                      *[Signature]*                      \_\_\_\_\_  
 Judge's Name                      Judge's Signature                      Date of Entry of Judgment  
 \_\_\_\_\_                      \_\_\_\_\_  
 Counsel for State/Signature (optional)                      Defendant/Defendant's Counsel/Signature (optional)

*[Signature]* hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOMMY R. KERNS, D.D.S.  
 CLERK  
 SULLIVAN CO., TN  
 2013 SEP -15 AM 10:08  
**FILED**

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 5 Counsel for the State: JOSEPH E. PERKINS  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offense ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/12/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-402 DUI 1<sup>st</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Restitution: Victim Name _____ Address _____ Total Amount \$ _____ Per Month _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. *[Signature]* \_\_\_\_\_ Date of Entry of Judgment \_\_\_\_\_  
 Judge's Name Judge's Signature  
*[Signature]* \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)  
 Counsel for State/Signature (optional)

*[Signature]* \_\_\_\_\_  
 hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

2013 SEP - 5 AM 10:08  
 FILED  
 TERRY PERKINS  
 CLERK  
 SULLIVAN COUNTY, TN



MINUTES the 5th of September, 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 6 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County: \_\_\_\_\_ ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> _____ Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry

Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours

Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)

Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Weeks \_\_\_\_\_ Months \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

*Shelia Dampson*  
 Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above

TERRY R. KERNS  
 CLERK  
 SULLIVAN CO., TN  
 2013 SEP -5 AM 10:08  
 FILED

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 7 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)			Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	Concurrent with: Count # 2 Consecutive to: Count # 1	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-24-204 Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective Date: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOBY BERNIS, CLERK  
 SULLIVAN COUNTY, TN  
 13 SEP - 5 AM 10:09  
 FILED

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 8 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____ <b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution: Victim Name</b> _____ <b>Address</b> _____ <b>Total Amount \$</b> _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, Shelia Simpson, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

FILED  
 2013 SEP -5 AM 10:18  
 CLERK  
 SULLIVAN CO. TN

**MINUTES the 5th of September 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 9 Counsel for the State: JOSEPH E. PERICH  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty – Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 – OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> _____ Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 – OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> <b>Conviction:</b> Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8.29.13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Consecutive to: Count # 1	From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine-Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Sex Offender Tax \$ _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours
--	---	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

I, Shelia Simpson, Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

MINUTES the 5th of September 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 10 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: [REDACTED] Sex: Female  
 Race: White SSN: [REDACTED] Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> At 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75% <input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Restitution: Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours
--	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

2013 SEP - 5 AM 10:38  
 FILED  
 JAMES R. KERNS, CLERK  
 CRIMINAL JUSTICE CENTER  
 SULLIVAN CO., TN

MINUTES the 5th of September 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 11 Counsel for the State: JOSEPH E. PERKINS  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County of Offense: \_\_\_\_\_ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Informatoin Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-2013</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One) <input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	Release Eligibility (Check One) <input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	Concurrent with: Count # 2 Consecutive to: Count # 1	Pretrial Jail Credit Period(s): From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
Sentenced To: <input checked="" type="checkbox"/> TDOC <input type="checkbox"/> County Jail <input type="checkbox"/> Workhouse Sentence Length: <u>3</u> Years _____ Months _____ Days _____ Hours <input type="checkbox"/> Life <input type="checkbox"/> Life w/out Parole <input type="checkbox"/> Death Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 55-10-401 DUI 4 <sup>th</sup> Offense or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: _____ % (Misdemeanor Only) Alternative Sentence: <input checked="" type="checkbox"/> Sup Prob <input type="checkbox"/> Unsup Prob <input type="checkbox"/> Comm Corr (CHECK ONE BOX) <u>3</u> Years _____ Months _____ Days _____ Hours WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Court Ordered Fees and Fines: \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____		Restitution: Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months			

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY, JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

*Shelia Simpson*

I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

2013 SEP -5 AM 10:18  
 FILED  
 TOMAS R. PERKINS, D.D.C.  
 CLERK OF CRIMINAL COURT  
 SULLIVAN CO., TN

**MINUTES, the 5th of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 12 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County of Offense: \_\_\_\_\_ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> _____ Offense Date: <u>07/13/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> <b>Conviction:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor. Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution: Victim Name</b> _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

*Shelia Simpson*, Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

DOMY R. KERNAN  
 CLERK OF COURT  
 SULLIVAN CO., TN  
 2013 SEP -5 AM 10:19  
**FILED**

**MINUTES, the 5<sup>th</sup> of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 13 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Coun. Number ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2103

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/26/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> <b>Conviction:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with:	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	Count # 2 Count # 1	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%		

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ _____ Months _____ Weeks _____ Months <input type="checkbox"/> Unpaid Community Service: _____ Hours
---	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

JIMMY R. KERNS  
 CLERK  
 SULLIVAN CO., TN  
 2013 SEP - 5 AM 10:09  
 FILED



**MINUTES the 5th of September 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 14 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Cour (ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/26/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8.29.13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years 0 Months 0 Days 0 Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-55-101 Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: 0 Months 0 Days 0 Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: 0 % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years 0 Months 0 Days 0 Hours  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 \_\_\_\_\_ Judge's Signature  
 \_\_\_\_\_ Date of Entry of Judgment  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)

I, Shelia Simpson, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOMMY R. PERRIN  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:19  
**FILED**

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 15 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Coun. ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>07/26/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75% <input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-201 DU 5 Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Restitution: Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 \_\_\_\_\_ Judge's Signature  
 \_\_\_\_\_ Date of Entry of Judgment  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TERRY KERRIS, DDC  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP - 5 AM 10:19  
**FILED**

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 16 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee  
 vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County: \_\_\_\_\_ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>08/02/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
		Consecutive to: Count # 1	

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
---	--	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions \_\_\_\_\_  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 \_\_\_\_\_ Judge's Signature  
 \_\_\_\_\_ Date of Entry of Judgment  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TERRY R. KERNS, CLERK  
 CRIMINAL JUSTICE CENTER  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:20  
**FILED**

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 17 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County: \_\_\_\_\_ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty -- Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/02/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
--	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55 39-13-501 DU<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
---	--

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

*Shelia Simpson*  
 I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOBMY PERRIN  
 CLERK  
 SULLIVAN CO. TN  
 2013 SEP -5 AM 10:22  
**FILED**

**MINUTES the 5<sup>th</sup> of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 18 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Gender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/06/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Active

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other:	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Restitution: Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
---	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 19 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Count, ██████████ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/12/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
Sentenced To: <input checked="" type="checkbox"/> TDOC <input type="checkbox"/> County Jail <input type="checkbox"/> Workhouse		Consecutive to: Count # 1	
Sentence Length: <u>3</u> Years _____ Months _____ Days _____ Hours <input type="checkbox"/> Life <input type="checkbox"/> Life w/out Parole <input type="checkbox"/> Death Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 55-10-401 DUI 4 <sup>th</sup> Offense or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: _____ % (Misdemeanor Only) Alternative Sentence: <input checked="" type="checkbox"/> Sup Prob <input type="checkbox"/> Unsup Prob <input type="checkbox"/> Comm Corr (CHECK ONE BOX) <u>3</u> Years _____ Months _____ Days Eff _____			
WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Court Ordered Fees and Fines: \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	Costs to be Paid by <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	Restitution: Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Months	

FILED  
 2013 SEP -5 AM 10:32  
 SULLIVAN CO., TN  
 CLERK OF COURT  
 EMMY R. KERNS

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_, Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 20 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County: \_\_\_\_\_ ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> _____ Offense Date: <u>08/12/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

<b>Offender Status (Check One)</b> <input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<b>Release Eligibility (Check One)</b> <input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SB1 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	<b>Concurrent with:</b> Count # 2  <b>Consecutive to:</b> Count # 1	<b>Pretrial Jail Credit Period(s):</b> From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
Sentenced To: <input checked="" type="checkbox"/> TDOC <input type="checkbox"/> County Jail <input type="checkbox"/> Workhouse Sentence Length: <u>3</u> Years <u>0</u> Months <u>0</u> Days <u>0</u> Hours <input type="checkbox"/> Life <input type="checkbox"/> Life w/out Parole <input type="checkbox"/> Death Mandatory Minimum Sentence Length: <u>39-17-417, 39-13-513, 39-13-514, or 39-17-432</u> in Prohibited Zone or <u>55-10-401</u> DUI 4 <sup>th</sup> Offense or <u>39-17-1324</u> Possession/Employment of Firearm or <u>40-39-208, -211</u> Violation of Sex Offender Registry Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: _____ % (Misdemeanor Only) Alternative Sentence: <input checked="" type="checkbox"/> Sup Prob <input type="checkbox"/> Unsup Prob <input type="checkbox"/> Comm Corr (CHECK ONE BOX) <u>3</u> Years _____ Months _____ Days Effective: _____ WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____		<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State		<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months	

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 21 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee  Retained  Pub Def Appt  Private Atty Appt  
 vs.  Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Circuit ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/12/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Consecutive to: Count # 1	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_% (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective Date: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution: Victim Name</b> _____ <b>Address</b> _____ <b>Total Amount \$</b> _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
---	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, Stella Simpson, Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TERRY R. KERNS  
 DRUG COURT CLERK  
 SULLIVAN CO., TN  
 2013 SEP -5 AM 10:28  
 FILED



MINUTES the 5th of September, 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 22 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: [REDACTED] Sex: Female  
 Race: White SSN: [REDACTED] Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Cou: \_\_\_\_\_ Identifier ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/12/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75% <input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

Court Ordered Fees and Fines:	Costs to be Paid by	Restitution: Victim Name _____
\$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Sex Offender Tax _____	Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 \_\_\_\_\_ Judge's Signature  
 \_\_\_\_\_ Date of Entry of Judgment  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TONY R. KERNS, D.C.  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:23  
 FILED

MINUTES the 5th of September 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 23 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFC... Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name AND TCA §: <u>53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name AND TCA §: _____ Offense Date: <u>08/12/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name AND TCA §: <u>53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> <b>Conviction:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Consecutive to: Count # 1	From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Offense)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 \_\_\_\_\_ Judge's Signature  
 \_\_\_\_\_ Date of Entry of Judgment  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)  
 I, \_\_\_\_\_ hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

FILED  
 2013 SEP - 5 AM 10:25  
 CLERK OF COURT  
 SULLIVAN CO., TN

IN THE CRIMINAL JUDICIAL COURT OF SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 24 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/17/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count #	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Consecutive to: Count # 1	From _____ to _____ From _____ to _____ From _____ to _____

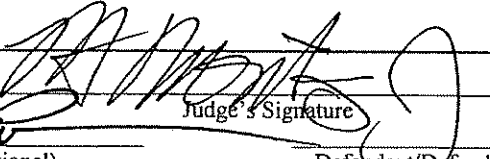
Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 Judge's Signature  
 Date of Entry of Judgment \_\_\_\_\_  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)  
 \_\_\_\_\_ Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above

FILED  
 2013 SEP -5 AM 10:25  
 CLERK  
 SULLIVAN COUNTY, TN

MINUTES the 5th of September 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 25 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee  
 vs.  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/DOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<input type="checkbox"/> Dismissed/Nolle Prosequi  <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E Indicted Offense Name AND TCA §: <u>53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name AND TCA §: _____ Offense Date: <u>08/17/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name AND TCA §: <u>53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One) <input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	Release Eligibility (Check One) <input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	Concurrent with: Count # 2  Consecutive to: Count # 1	Pretrial Jail Credit Period(s): From _____ to _____ From _____ to _____ From _____ to _____
Sentenced To: <input checked="" type="checkbox"/> TDOC <input type="checkbox"/> County Jail <input type="checkbox"/> Workhouse Sentence Length: <u>3</u> Years _____ Months _____ Days _____ Hours <input type="checkbox"/> Life <input type="checkbox"/> Life w/out Parole <input type="checkbox"/> Death Mandatory Minimum Sentence Length: _____ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or _____ 55-10-401 DUI 4 <sup>th</sup> Offense or _____ 39-17-1324 Possession/Employment of Firearm or _____ 40-39-208, -211 Violation of Sex Offender Registry Period of incarceration to be served prior to release on probation or Community Corrections: _____ Months _____ Days _____ Hours Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: _____ % (Misdemeanor Only) Alternative Sentence: <input checked="" type="checkbox"/> Sup Prob <input type="checkbox"/> Unsup Prob <input type="checkbox"/> Comm Corr (CHECK ONE BOX) <u>3</u> Years _____ Months _____ Days _____ Hours WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Court Ordered Fees and Fines: \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____		Costs to be Paid by <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Restitution: Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months			

TOBY R. KERNS  
 CLERK OF COURT  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:26  
**FILED**

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_, Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 26 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Cour: \_\_\_\_\_ ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 ~ OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/17/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 ~ OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Sex Offender Tax \$ _____	<b>Restitution: Victim Name</b> _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	---	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. Judge's Name  
 \_\_\_\_\_ Judge's Signature  
 \_\_\_\_\_ Date of Entry of Judgment  
 \_\_\_\_\_ Counsel for State/Signature (optional)  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)

Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above

TOMMY R. HERNANDEZ  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:27  
 FILED

**MINUTES the 5<sup>th</sup> of September, 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 27 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Subject ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/20/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____  From _____ to _____  From _____ to _____  From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
---	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions \_\_\_\_\_  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

Julie Simpson Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above

FILED  
 2013 SEP -5 AM 10:27  
 T.M. YERGENS  
 CLERK  
 SULLIVAN COUNTY, TN

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 28 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: [REDACTED] Sex: Female  
 Race: White SSN: [REDACTED] Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Cou... # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>08/21/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> <b>Conviction:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

*Theresa Simpson* Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOMMY R. KERNS, D.D.C.  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:27  
**FILED**

MINUTES the 5th of September, 2013  
 IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE

**COPY**

Case Number: S62163 Count: 29 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH BUFFORD Alias: \_\_\_\_\_ Date of Birth: [REDACTED] Sex: Female  
 Race: White SSN: [REDACTED] Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County: \_\_\_\_\_ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>08/24/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input checked="" type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

*Julia Simpson*  
 I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

2013 SEP - 5 AM 10:27  
 FILED  
 TOM R. HERNS, D.C.  
 CLERK  
 SULLIVAN CO., TN



**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 30 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Circuit ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<input type="checkbox"/> Dismissed/Nolle Prosequi  Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/24/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____
	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	Consecutive to: Count # 1	

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Eff. Date: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution: Victim Name</b> _____ <b>Address</b> _____ <b>Total Amount \$</b> _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours
---	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)  
 \_\_\_\_\_  
 Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

2013 SEP - 5 AM 10:28  
 FILED  
 CLERK OF COURT  
 SULLIVAN CO., TN

**MINUTES the 5<sup>th</sup> of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 31 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Co. ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §:</u> Offense Date: <u>08/24/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years 0 Months 0 Days 0 Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or 55-10-401 DUI 4<sup>th</sup> Offense  
 or 39-17-1324 Possession/Employment of Firearm or 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: 0 Months 0 Days 0 Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: 0 % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years 0 Months 0 Days 0 Hours  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Sex Offender Tax \$ _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	---	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

Special Conditions  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_ Date of Entry of Judgment \_\_\_\_\_  
 Judge's Name Judge's Signature  
 \_\_\_\_\_ Defendant/Defendant's Counsel/Signature (optional)  
 \_\_\_\_\_ Counsel for State/Signature (optional)

I, \_\_\_\_\_, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

2013 SEP -5 AM 10:31  
 FILED  
 TOMMY R. PERRINS, D.C.  
 CLERK  
 SULLIVAN CO., TN

**MINUTES, the 5<sup>th</sup> of September, 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE** **COPY**

Case Number: S62163 Count: 32 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUFFORD Alias: \_\_\_\_\_ Date of Birth: ██████████ Sex: Female  
 Race: White SSN: ██████████ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County: \_\_\_\_\_ Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6<sup>th</sup> day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference  Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/24/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <b>D</b> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
Sentenced To: <input checked="" type="checkbox"/> TDOC <input type="checkbox"/> County Jail <input type="checkbox"/> Workhouse Sentence Length: <u>3</u> Years <u>0</u> Months <u>0</u> Days <u>0</u> Hours <input type="checkbox"/> Life <input type="checkbox"/> Life w/out Parole <input type="checkbox"/> Death Mandatory Minimum Sentence Length: <u>39-17-417, 39-13-513, 39-13-514, or 39-17-432</u> in Prohibited Zone or <u>55-10-401</u> DUI 4 <sup>th</sup> Offense or <u>39-17-1324</u> Possession/Employment of Firearm or <u>40-39-208, -211</u> Violation of Sex Offender Registry Period of incarceration to be served prior to release on probation or Community Corrections: <u>0</u> Months <u>0</u> Days <u>0</u> Hours Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: <u>0</u> % (Misdemeanor)		Consecutive to: Count # 1  From _____ to _____ From _____ to _____ From _____ to _____	
Alternative Sentence: <input checked="" type="checkbox"/> Sup Prob <input type="checkbox"/> Unsup Prob <input type="checkbox"/> Comm Corr (CHECK ONE BOX) <u>0</u> Years <u>0</u> Months <u>0</u> Days WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Court Ordered Fees and Fines: \$ _____ Court Costs <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Sex Offender Tax \$ _____ Other: _____		Restitution: Victim Name _____ Address _____ Total Amount \$ _____ _____ Months _____ Weeks _____ Months <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months	

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR.

Judge's Name

Judge's Signature

Date of Entry of Judgment

Counsel for State/Signature (optional)

Defendant/Defendant's Counsel/Signature (optional)

*Kelia Simpson* Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TONY R. KERNS  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:31  
 FILED

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 33 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2nd Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNN BUIFF Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Offender ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/24/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	--

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input checked="" type="checkbox"/> Mitigated 30% <input type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution: Victim Name</b> _____ <b>Address</b> _____ <b>Total Amount \$</b> _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_, Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOMB R. KERNS  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -5 AM 10:31  
 FILED

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 34 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee  Retained  Pub Def Appt  Private Atty Appt  
 vs.  Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUFFORD Alias: \_\_\_\_\_ Date of Birth: [REDACTED] Sex: Female  
 Race: White SSN: [REDACTED] Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ County Circuit ID # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.

On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	<b>Indictment:</b> Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/24/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8-29-13</u>
---	---

After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

**Sentenced To:**  TDOC  County Jail  Workhouse  
**Sentence Length:** 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death  
 Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 55-10-401 DUI 4<sup>th</sup> Offense  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
**Alternative Sentence:**  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days Effective: \_\_\_\_\_

WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours
--	--	---

The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**

Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

*Shelia Simpson* Clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above

2013 SEP -5 AM 10:30  
 FILED  
 SULLIVAN COUNTY, TN  
 CLERK

**MINUTES the 5th of September, 2013**  
**IN THE CRIMINAL/CIRCUIT COURT FOR SULLIVAN COUNTY, TENNESSEE**

**COPY**

Case Number: S62163 Count: 35 Counsel for the State: JOSEPH E. PERRIN  
 Judicial District: 2<sup>nd</sup> Judicial Division: Criminal I Counsel for the Defendant: E. LYNN DOUGHERTY  
 State of Tennessee vs.  Retained  Pub Def Appt  Private Atty Appt  
 Counsel Waived  Pro Se  
 Defendant: ELIZABETH LYNNE BUFFORD Alias: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Female  
 Race: White SSN: \_\_\_\_\_ Driver License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 State ID #: \_\_\_\_\_ Court: \_\_\_\_\_ # (if applicable): \_\_\_\_\_ TOMIS/TDOC #: \_\_\_\_\_  
 Relationship to Victim: \_\_\_\_\_ Victim's Age: \_\_\_\_\_  
 State Control #: \_\_\_\_\_ Arrest Date: \_\_\_\_\_ Information Filing Date: 3/27/2013

**JUDGMENT**  Original  Amended  Corrected

Comes the District Attorney General for the State and the defendant with counsel of record for entry of judgment.  
 On the 6th day of June, 2013, the defendant:

<input checked="" type="checkbox"/> Pled Guilty <input type="checkbox"/> Dismissed/Nolle Prosequi <input type="checkbox"/> Pled Nolo <input type="checkbox"/> Pled Guilty - Certified Question Findings Incorporated by Reference Is found: <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Not Guilty by Reason of <input type="checkbox"/> Bench Trial	Indictment: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Indicted Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Amended Offense Name <u>AND TCA §: _____</u> Offense Date: <u>08/28/2012</u> County of Offense: <u>SULLIVAN</u> Conviction Offense Name <u>AND TCA §: 53-11-402 - OBTAINING CONTROLLED SUBSTANCE BY FRAUD</u> Conviction: Class (circle one) 1 <sup>st</sup> A B C <u>D</u> E <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Is this conviction offense methamphetamine related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Sentence Imposed Date: <u>8.29.13</u>
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After considering the evidence, the entire record, and in the case of sentencing, all factors in Tennessee Code Annotated Title 40, Chapter 35, all of which are incorporated by reference herein, it is ORDERED and ADJUDGED that the conviction described above is imposed hereby and that a sentence and costs are imposed as follows:

Offender Status (Check One)	Release Eligibility (Check One)	Concurrent with: Count # 2	Pretrial Jail Credit Period(s):
<input type="checkbox"/> Mitigated <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Multiple <input type="checkbox"/> Persistent <input type="checkbox"/> Career <input type="checkbox"/> Repeat Violent	<input type="checkbox"/> Mitigated 20% <input type="checkbox"/> Mitigated 30% <input checked="" type="checkbox"/> Standard 30% <input type="checkbox"/> Multiple 35% <input type="checkbox"/> Persistent 45% <input type="checkbox"/> Career 60% <input type="checkbox"/> Agg Rob 85% <input type="checkbox"/> Violent 100% <input type="checkbox"/> Repeat Viol 100%	<input type="checkbox"/> Agg Rob w/Prior 100% <input type="checkbox"/> Multiple Rapist 100% <input type="checkbox"/> Child Rapist 100% <input type="checkbox"/> Child Predator 100% <input type="checkbox"/> Agg Rapist 100% <input type="checkbox"/> Mult 39-17-1324 100% <input type="checkbox"/> Att 1 <sup>st</sup> Degree Murder w/SBI 85% <input type="checkbox"/> Agg Child Neglect/Endangerment <input type="checkbox"/> Agg Assault w/Death 75%	<input type="checkbox"/> 1 <sup>st</sup> Degree Murder <input type="checkbox"/> Drug Free Zone <input type="checkbox"/> Gang Related
		Consecutive to: Count # 1	From _____ to _____ From _____ to _____ From _____ to _____ From _____ to _____

Sentenced To:  TDOC  County Jail  Workhouse  
 Sentence Length: 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Hours  Life  Life w/out Parole  Death

Mandatory Minimum Sentence Length: \_\_\_\_\_ 39-17-417, 39-13-513, 39-13-514, or 39-17-432 in Prohibited Zone or \_\_\_\_\_ 53-11-401  
 or \_\_\_\_\_ 39-17-1324 Possession/Employment of Firearm or \_\_\_\_\_ 40-39-208, -211 Violation of Sex Offender Registry  
 Period of incarceration to be served prior to release on probation or Community Corrections: \_\_\_\_\_ Months \_\_\_\_\_ Days  
 Minimum service prior to eligibility for work release, furlough, trustee status and rehabilitative programs: \_\_\_\_\_ % (Misdemeanor Only)  
 Alternative Sentence:  Sup Prob  Unsup Prob  Comm Corr (CHECK ONE BOX) 3 Years \_\_\_\_\_ Months \_\_\_\_\_ Days \_\_\_\_\_ Eff  
 WAS DRUG COURT ORDERED AS A CONDITION OF THE ALTERNATIVE SENTENCE?  Yes  No

<b>Court Ordered Fees and Fines:</b> \$ _____ Court Costs \$ _____ Fine Assessed \$ _____ Traumatic Brain Injury Fund (68-55-301 et seq.) \$ _____ Drug Testing Fund (TN Drug Control Act) \$ _____ CICF \$ _____ Other: _____	<b>Costs to be Paid by</b> <input checked="" type="checkbox"/> Defendant <input type="checkbox"/> State Sex Offender Tax \$ _____	<b>Restitution:</b> Victim Name _____ Address _____ Total Amount \$ _____ Per Month \$ _____ <input type="checkbox"/> Unpaid Community Service: _____ Hours _____ Days _____ Weeks _____ Months
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The Defendant having been found guilty is rendered infamous and ordered to provide a biological specimen for the purpose of DNA analysis.  
 Pursuant to 39-13-521 the defendant is ordered to provide a biological specimen for the purpose of HIV testing.  
 Pursuant to 39-13-524 the defendant is sentenced to community supervision for life following sentence expiration.  
 Pursuant to Title 68, Chapter 11, Part 10, the clerk shall forward this judgment to the Department of Health.

**Special Conditions**  
 Payment of fines, restitution, and costs, as a condition of supervision by the Tennessee Department of Probation and Parole, based upon the defendant's ability to pay.

ROBERT H. MONTGOMERY JR. \_\_\_\_\_  
 Judge's Name Judge's Signature Date of Entry of Judgment  
 \_\_\_\_\_  
 Counsel for State/Signature (optional) Defendant/Defendant's Counsel/Signature (optional)

I, \_\_\_\_\_ clerk, hereby certify that, before entry by the court, a copy of this judgment was made available to the party or parties who did not provide a signature above.

TOMMY R. HENS  
 CLERK  
 SULLIVAN COUNTY, TN  
 2013 SEP -15 AM 10:32  
**FILED**