

BEST COPY

FILED IN COURT
GARY L. HARRISON
CLERK, SUPERIOR COURT

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

7/1/25
BY: H. Kay
DEPUTY CLERK

STATE OF ARIZONA

COUNTY/DIVISION: Pima

v. Lane Myers

CR: 20251040-001

§ 13-901.01 Offense: ☐ 1st ☐ 2nd ☐ Ineligible

OFFENSE(S):

AC14: Stalking Distress/Fear (FS)

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

☒ **PLACING** the defendant on probation for a period of 3 ☒ year(s) ☐ month(s) ☐ days ☐ lifetime

☒ to begin 7 / 1 / 25

☐ upon absolute discharge from prison for a separate offense or

☐ upon release from prison for felony DUI (____ months; ____ days credit for time served)

☐ **REINSTATING** the defendant on probation for a period of ____ ☐ year(s) ☐ month(s) ☐ days ☐ lifetime

☐ to begin ____/____/____ with a revised expiration date of ____/____/____

☐ **REQUIRING** the defendant be incarcerated in the county jail for ____ days, with credit for ____ days

☐ to begin ____/____/____ (____ am/pm) ☐ not released until ____/____/____ (____ am/pm)

☐ early release upon ____ ☐ eligible for work release

☐ as an intermediate sanction implemented by the APD in consecutive or nonconsecutive intervals as approved by the court

and **ORDERING** the defendant to pay assessments listed in the attached Financial Order and Judgment and abide by the following **CONDITIONS OF PROBATION**:

1. I will obey all criminal laws.
2. I will comply with the APD written regulations to help me establish a law-abiding lifestyle.
3. I will report to my probation officer as directed by the APD, and within 72 hours of any of the following:
a.) any contact with law enforcement; and b.) sentencing or release from incarceration or residential treatment.
4. I will actively participate in treatment and other programs of assistance and will sign a release or consent document to allow the APD to exchange information related to my progress.
5. I will provide my current address to the APD, reside at the location approved by the APD, and provide the APD safe, unrestricted access to my place of residence.
6. I will request and obtain APD approval before leaving the state.
7. I will submit to drug and alcohol testing as directed by the APD.
8. I will not possess weapons, including firearms and ammunition, nor use anything to threaten or cause bodily harm or property damage.
9. I will allow the search and seizure of my person and property by the APD without a search warrant.

SPECIAL CONDITIONS:

10. ☒ I will not have any contact with the victim(s) in any form, unless approved in writing by the APD.
11. ☐ I will prioritize payment of restitution to the victim(s) prior to making discretionary expenditures.
12. ☐ I will complete a total of ____ hours of community restitution as implemented by the APD.
13. ☐ I will self-report to the county jail as required above.
14. ☐ I will not consume or possess alcoholic beverages.

H. Kay 7-1-25

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15. ☒ I will comply with the following requirement(s) of the Court or attached Special Conditions:

Do not ~~see~~ contact the victim, her family, go to their home, her place of employment. Do not encourage others to contact the victim or her family go to her home or place of employment. Do not engage in activities that would be reasonably ~~be~~ expected to cause others to harass or contact the victim or her family. Remove all videos from streaming services & social media that mention the victim or her family, including identifying ^{YouTube} information about them. Allow APD full access to YouTube channel & other social media to determine ^{whether} you are abiding by the conditions.

Do not associate or communicate, with, directly or indirectly

① Joshua Gray, or ② Mark Kelly,

☐ Intensive Probation

☐ Sex Offender

☐ Gang

☐ Domestic Violence

☐ Drug/DUI Court

☐ Mental Health

☐ Veterans Court

☐ _____

Do not post information about the victim or her husband or two my children on YouTube or social media.

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

[Signature] 2/1/25
Judge of the Superior Court Date

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

[Signature] 7-1-25
Defendant Signature Date Phone Email

Defendant Address Apt. City State Zip Phone