



# COOK COUNTY SHERIFF'S OFFICE

## ELECTRONIC MONITORING PARTICIPANT CONTRACT

### ELECTRONIC MONITORING PARTICIPANT

DATE: 09/27/2019	BOOKING ID: 20190808140	INMATE ID: 0098790	HOUSING:	PROGRAM CATEGORY: EM
LAST NAME: Wilbourn	FIRST NAME: Vondell	GENDER: M	RACE: Black	PHONE NO: [REDACTED]
ALIAS 1: Vondell J Wilbourn		ALIAS 2:		ALIAS 3:
ORIGINAL COURT BRANCH: Criminal Courts Building	ORIGINAL ORDER DATE: 08/08/2019	NEXT COURT BRANCH: Criminal Courts Building	NEXT COURT DATE: 10/15/2019	NEXT COURT TIME: 9:30AM

You have been court ordered to participate in the Cook County Sheriff's Electronic Monitoring Program in lieu of being detained in the Cook County Department of Corrections, and do hereby agree to abide by the conditions of the Monitoring Program. By affixing your initials to each program condition and your signature at the end of this contract, you do hereby agree to the fact that you fully understand this contract and agree to the conditions set forth herein.

INITIAL:

VW

You agree to remain within the interior premises of your residence twenty-four hours per day unless Sheriff's Office Personnel have granted prior approval of an absence.

VW

You agree to admit representatives of this program into your residence twenty-four hours per day to ensure compliance with the conditions of this program.

VW

You agree to make necessary arrangements to allow for representatives of this program to visit your place of employment and or place of education for the purposes of verifying your compliance with the conditions of this program.

VW

You agree to maintain a monitoring device in your residence, and on your person. You agree to obtain approval from the Sheriff's Office prior to changing your address or scheduling movement.

VW

You agree not to commit another crime while on Electronic Monitoring.

VW

You agree to return all of the monitoring equipment issued to you upon being notified of your discharge from the program. Failure to return the equipment may subject you to arrest for felony theft and/or criminal damage to property and/or you will reimburse the contractor for the cost of the missing or damaged equipment.

VW

You understand that violation of the program conditions may result in a warrant being issued for your arrest for the crime of escape under 730 ILCS 5/5-8A-4.1 or being returned to the department of corrections.

VW

You agree to pay a daily participation fee if ordered by the court to do so under 725 ILCS 5/110-10(b)(14.2 and 14.3).

VW

You agree to pay the fee in full to the Clerk of the Circuit Court prior to the disposition of your case or completing your sentence.

VW

You agree that when movement is approved by the Sheriff to go to a specific location you shall only go to and from that location. Any stops at any location outside of your approved movement is a program violation.

VW

You agree to register as a sex offender, violent offender against youth, and or a Chicago gun offender within three days of being placed on Electronic Monitoring if required to do so per state or municipal statute.

### Your signature below indicates the following:

VW

That you have read and agree to the above conditions.

VW

That you have received a cellular home monitoring receiving unit (CHMRU), external monitoring transmitter (XMT), power cord, and that the equipment issued is in good condition with no visible damage. Additionally, the ankle bracelet placed on you is properly fitted and is not causing any discomfort from tightness.

VW

That you have received a detailed copy of the rules and regulations of Electronic Monitoring and agree to follow and abide by them.

VW

That you understand that failure to comply with the rules and regulations may result in your reincarceration into the Cook County Department of Corrections.

VW

That you have viewed the Electronic Monitoring new release participant video, and received instructions on how to use the cellular unit.

PARTICIPANT SIGNATURE:

Vondell Wilbourn

DATE:

09-27-2019

### ELECTRONIC MONITORING PERSONNEL ONLY

The signature below indicates that I have witnessed the signature of the participant named above, and that I personally attest that all equipment issued is working properly and in good condition with no damage to the cases or cords.

ORIGINAL EQUIPMENT ISSUED: CHMRU or GSM-HMRU#: 50470882

XMT#: 232125

INVESTIGATOR SIGNATURE:

[Signature]

STAR#

6039

DATE:

9-27-19

Exhibit B



## COOK COUNTY SHERIFF'S OFFICE

## COMMUNITY CORRECTIONS - ELECTRONIC MONITORING (EM) PROGRAM (GPS)

## PARTICIPANT AGREEMENT

## PARTICIPANT INFORMATION

DATE: 01-15-21	BOOKING ID: 20190808140	HOUSING:	PROGRAM CATEGORY:	
LAST NAME: Wilbourn	FIRST NAME: Vondell	GENDER: m	RACE: BLK	PHONE NUMBER: [REDACTED]
ALIAS 1:	ALIAS 2:	ALIAS 3:		

## AGREEMENT INFORMATION

You have been court ordered to participate in the Cook County Sheriff's Electronic Monitoring Program (hereinafter the "Program") in lieu of being detained in the Cook County Department of Corrections. You do hereby agree to abide by the conditions of the Program. By affixing your initials to each program condition and your signature at the end of this contract, you do hereby agree that you fully understand this Agreement and agree to the conditions set forth herein:

- VW I agree to remain within the interior premises of my Approved Residence twenty-four hours per day unless Sheriff's Office Personnel have granted prior approval for movement.
- VW I agree to admit representatives of the Program into my Approved Residence twenty-four hours per day to ensure compliance with the conditions of the Program. Staff will be wearing Body Worn Camera (BWC).
- VW I agree to make necessary arrangements to allow for representatives of the Program to visit my place of employment, educational institution, or other locations for which I have requested movement for the purposes of verifying my compliance with the conditions of the Program.
- VW I understand the electronic monitoring of my person will use a global positioning system (GPS) and cellular towers to track my physical location and program compliance at all times.
- VW I understand that I will be assigned an electronic monitoring GPS device, worn as a bracelet. I will wear and maintain the device at all times and ensure its safety and security in my Approved Residence and on my person. I agree to accept incoming communication from the device in order to confirm my compliance with the terms of the Program.
- VW I understand that, if I receive a GPS bracelet, the GPS unit must be plugged into an active electrical outlet for a minimum of two (2) consecutive hours every day. Failure to charge the GPS device is considered tampering and is a violation of program rules and will result in reincarceration.
- VW I understand that any attempt to tamper or remove the ankle bracelet, or any other device or equipment assigned to monitor me, is a violation of the Program and may subject me to prosecution for the crime of escape.
- VW I will not engage in any criminal activity while participating in the Program.
- VW I understand that my person, my property, and/or my personal space within the Approved Residence may be subject to warrantless search by representatives of the Program in order to ensure compliance with the terms of the Program, any applicable court orders and on-going officer safety.
- VW I agree to return all of the monitoring equipment issued to me upon being notified of my discharge from the Program. I understand that failure to return the equipment may subject me to arrest and/or fine for the cost of the missing or damaged equipment.
- VW I understand that violation of the Program may result in a warrant being issued for my arrest for the crime of escape or may result in my reincarceration in the Department of Corrections.
- VW I agree to pay a daily participation fee if ordered by the court to do so. I agree to pay the fee in full to the Clerk of the Circuit Court prior to the disposition of my case or completing my sentence.

JW I agree that when movement is approved by the Sheriff's Office to go to a specific location, I am only authorized to go to and from that location. Any stops at any location or detours outside of my approved movement is a Program violation.

JW I agree to register as a sex offender, violent offender against youth, and or a Chicago gun offender within three days of being placed on Electronic Monitoring if required to do so per state or municipal statute.

JW I agree to come into compliance with my FOID revocation status, if applicable, within 14 days by, depending on what is required, surrendering my FOID card to the Sheriff's Office, completing a Firearm Disposition Record or submitting any other required forms to the appropriate agency.

JW I understand that I cannot relocate to another residence until I have been a Program participant for at least thirty (30) days. I understand that I can only relocate my Approved Residence once for the total duration of my time in the Program. I understand that, even if an emergency arises requiring my relocation, I must notify the Sheriff's Office prior to leaving my Approved Residence.

JW I agree to participate in the following programming as a condition of my placement in the Sheriff's EM Program:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your signature below indicates the following:

JW That you have read and agree to the above conditions.

JW That you have received the following equipment and that the equipment issued is in good condition with no visible damage: a GPS enabled ankle bracelet monitoring unit and charger (GPS);

JW That the ankle bracelet(s) placed on you is properly fitted and is not causing any discomfort from tightness.

JW That you have received a copy of the Participant Information Sheet and agree to follow and abide by all rules contained therein.

JW That you understand that failure to comply with the rules and regulations may result in your reincarceration into the Cook County Department of Corrections.

JW That you have viewed the Electronic Monitoring new release participant video and received instructions on how to use the GPS unit.

### PARTICIPANT'S SIGNATURE

PARTICIPANT'S SIGNATURE:

*Vanell Wilbain*

DATE:

01-15-21

### ELECTRONIC MONITORING MEMBERS ONLY BELOW

The signature below indicates that I have witnessed the signature of the participant named above, and that I personally attest that all equipment issued is working properly and in good condition with no damage to the cases or cords.

ORIGINAL EQUIPMENT ISSUED:

GPS Ankle Monitor# ☒ *20102455*

Power Cord: ☒

### INVESTIGATOR SIGNATURE

INVESTIGATOR'S SIGNATURE:

*[Signature]*

STAR #:

*602*

DATE:

*1-15-21*