IN THE CIRCUIT COURT OF BENTON COUNTY, ARKANSAS
DIVISION 1

STATE OF ARKANSAS **PLAINTIFF**

Vs. **Case No.:2026-0289-1**

KEISHAUN ANTHONY BOWEN **DEFENDANT**

PLEA AGREEMENT AND ORDER

A. DEFENDANT AGREES TO PLEAD GUILTY TO:

Distributing, Possession, or viewing matter depicting sexually explicit conduct involving a child - C Felony

B. PROSECUTING ATTORNEY AGREES TO RECOMMEND THE FOLLOWING:

1. Probation: 4 year(s) state supervised probation

2. Assessment of Court Costs, Fines, Restitution:

$ 150.00 Court Costs	$ 1000.00 Fine
$ 40.00 Booking Fee	$ 500.00 Public Defender
$ 15.00 Court Technology Fee	$ 50.00 Sex Offender Registration Fee

PAYABLE: $50.00, plus a $5.00 collection fee per month beginning 120 days after date of release until paid in full. To be paid to Benton County Circuit Clerk, 102 N.E. A St, Bentonville, AR 72712 or online at www.myfinepayment.com.

3. County Jail Time: 120 day(s) with 178 day(s) credit for time served

4. Defendant is to comply with the following additional conditions:

☒ - No unsupervised contact with minors

☒- Register as a sex offender and comply with registration requirements

Defendant is to enroll in and provide proof of such enrollment to his/her probation/parole officer any classes ordered within 30 days of entering the plea agreement or release from custody whichever comes later.

DATE: 8/17/2026

Kelshaun Bowen
Defendant

Deputy Prosecuting Attorney

Sara Espinoza Koch
Attorney for Defendant - Sara Espinoza Koch

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ORDER

I. Defendant's plea is accepted as written above and stated on the record.

IT IS SO ORDERED.

DATE: 8-17-26

CIRCUIT JUDGE

IN THE CIRCUIT COURT OF BENTON COUNTY, ARKANSAS
DIVISION 1

STATE OF ARKANSAS **PLAINTIFF**

Vs. **Case No.:2026-0289-1**

KEISHAUN ANTHONY BOWEN **DEFENDANT**

DEFENDANT'S STATEMENT

THE DEFENDANT REPRESENTS TO THE COURT:

1. My full name is KEISHAUN ANTHONY BOWEN and I request that all proceedings against me be had in that name, and I am mentally competent to make this petition. I understand should the plea of guilty herein tendered not be accepted and a trial follows, that admissions made herein would not be admissible against me at said trial.

2. I am represented by an attorney whose name is Sara Espinoza Koch.

3. I will plead guilty to the charge(s) of:

> Distributing, Possession, or viewing matter depicting sexually explicit conduct involving a child - C Felony

4. I have told my attorney all the facts and circumstances known to me about the charges asserted in the Information. I believe that my attorney is fully informed in all such matters. My attorney has counseled and advised me of the nature on each charge and on all possible defenses that I might have in this case. I believe that my attorney has done all that anyone could do to counsel and assist me, **AND I AM SATISFIED WITH THE ADVICE AND HELP MY ATTORNEY HAS GIVEN ME.**

5. I understand that I may plead "not guilty" to any offense charged against me. If I choose to plead "not guilty" the Constitution guarantees me (a) the right to a speedy and public trial by jury, (b) the right to see and hear all witnesses called to testify against me, (c) the right to use the power and process of the Court to compel the witnesses in my favor and (d) the right to have the assistance of an attorney at all stages of the proceedings, (e) I also understand that if I do not have funds and cannot obtain funds to employ an attorney, the Court will appoint an attorney to represent me, and (f) that I do not have to testify against myself.

6. I also understand that if I plead "guilty" to the charge(s) against me, the Court may impose the same punishment as if I had pleaded "not guilty", stood trial and had been convicted by a jury.

7. My attorney informed me that the punishment which the law provides for the offense(s) charged in the Information is: (Check all that apply)

> ☒ - 3-10 yrs./$10,000.00 fine [C Fel.]

8. I declare that no officer or agent of any branch of government (federal, state, or local) nor my attorney, nor any other person(s), have made any promise of any kind to me, or within my knowledge to anyone else, that I will receive a lighter sentence, or probation, or any other form of leniency if I plead "guilty", except as to the recommendation contained herein on the plea agreement offered by the Prosecuting

Attorney.

9. My attorney has advised me of the potential parole eligibility for the crime of which I have been charged. I understand that my parole is the sole responsibility of the Board of Pardons and Paroles, and I understand that this Court and my attorney and the Prosecutor do not have any control of whether or not I am granted a pardon or parole. I also understand that parole is a privilege and not a right. No person has made me any promise of any kind concerning the actual time that I will have to serve before I am eligible for parole. I also understand that I may not be granted parole.

10. I have advised my attorney of my citizenship/immigration status and my attorney has advised me of the consequences thereto upon criminal conviction and the plea contained herein. No person has made me any promise regarding my citizenship/immigration status and I understand and hereby acknowledge that my final status will ultimately be determined by a separate federal court.

11. If the Act 346 of 1975 provision is noted on the Plea Agreement and Order, my attorney has explained to me what Act 346 of 1975 is, and I affirm to the Court that I have not previously been convicted of a felony nor is there anything on my record to prevent me from being eligible for Act 346 nor have I previously availed myself of the benefits of Act 346 of 1975.

12. My attorney, pursuant to Arkansas Rules of Professional Conduct, Rule 1.19, has advised me that my client file will be retained by my attorney for a period of five (5) years after the conclusion of representation in the above-styled case(s) (e.g. judgement/commitment being filed). I understand that at the conclusion of the five (5) years, my attorney may destroy my client file in the above-styled case(s). I understand that I may obtain a copy of my client file, upon written request to my attorney, prior to the conclusion of the five (5) years and that costs of copying the client file are my responsibility. I understand that if I receive a life sentence, the attorney shall retain a copy of my file for the remainder of my life.
KB

13. I plead "guilty" and respectfully request the Court to accept my plea of "guilty" and to enter my plea of "guilty".

14. I OFFER MY PLEA OF "GUILTY" FREELY AND VOLUNTARY AND OF MY OWN ACCORD AND WITH FULL UNDERSTANDING OF ALL THE MATTERS SET FORTH IN THE INFORMATION AND IN THIS PETITION AND THIS PLEA IS WITH THE ADVICE AND CONSENT OF MY ATTORNEY.

SIGNED BY ME IN THE PRESENCE OF MY ATTORNEY THIS DAY 8/17/2026

Richard Bowen
Defendant

SIGNED BY ME IN THE PRESENCE OF MY ATTORNEY THIS DAY 8/17/2026

Sara Espinoza Koch
Attorney for Defendant - Sara Espinoza Koch

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STATE OF ARKANSAS **PLAINTIFF**

Vs. **Case No.:2026-0289-1**

KEISHAUN ANTHONY BOWEN **DEFENDANT**

PROBATION AGREEMENT

Now on this 17 of ~~June~~ August, 2026, the Defendant having entered a plea of guilty or having been found guilty in the above styled action and the Court having placed the defendant on probation for a period of 4 years for the offense(s) of: Distributing, Possession, or viewing matter depicting sexually explicit conduct involving a child - C Felony.

IT IS HEREBY ORDERED that the following conditions of said probation are imposed upon the defendant:

1) You must not commit a criminal offense punishable by imprisonment. If arrested or questioned by a law enforcement officer, you will notify your supervising officer within 24 hours, unless such arrest or questioning occurs on a weekend, in which case you will notify your supervising officer the next working day.

2) You must not drink or possess intoxicating or alcoholic beverages, or be present in any establishment where its main source of income is derived from the sale of such beverages.

3) You must not use, sell, distribute, or possess any controlled substance, or associate with any person who is participating in or is know to participate in the illegal use, sale, distribution or possession of controlled substances, or be present in places where such persons congregate. You may use or possess controlled substances pursuant to a legitimate prescription from a physician. You must be able to present proof of your prescription and provide physician's name as requested. You must submit to random testing for the use of illegal substances or intoxicants. Testing may be of your breath, blood or urine at the direction of any supervising offices. You must pay for the expense of such testing.

4) You must not associate with persons who have been convicted of felonies, persons who are engaged in criminal activity, or other persons specified by any supervising officer.

5) You must not purchase, own, control or possess any firearm or other prohibited deadly weapon at any time, or be in the company of any person possessing the same.

6) You must report as directed to a supervising officer and permit him or her to visit you in your residence, place of employment or other property.

7) You must be gainfully employed or enrolled as a student at all times, pay your share of household expenses, support your legal dependents and pay all court ordered child support. You must notify your supervising officer in advance of any change in your address, employment, education,

telephone number, or family status. Where circumstances make it impossible for you to give advance notice, you must give notice as soon as possible. Prior approval for a supervising officer is required for you to change or stay away from your place of residence or to quit your employment.

8) You must remain within the State of Arkansas unless granted permission to leave by your supervising officer. You agree to waive extradition from any jurisdiction in or outside the United States of America and to not contest any effort to return you to the State of Arkansas.

9) Your Supervising Officer may require you to submit to any of the following: drug and alcohol treatment, psychiatric or counseling program, community based programs, or other available rehabilitative programs. You are responsible for the expense of any programs deemed necessary and must provide proof of compliance.

10) You must be truthful in all statements made to a supervising officer.

11) You must pay by money order a supervision fee of $35.00 per month to the Department of Community Punishment.

12) You must pay the costs, fine(s), and victim restitution to the Benton County Circuit Clerk, 102 N.E. A St., Bentonville, AR 72712, as set out in the Plea Agreement and Order or online at www.myfinepayment.com.

13) You must serve a period of confinement for 120 day(s) at the Benton County Detention Center with credit for ~~121~~ 178 day(s) time served

14) You must comply with the special conditions imposed by the court.
If the Court revokes your probation for your violating a condition, it may impose on you a sentence of up to 10 years minus any credit for time served.

15) You shall consent to a search of your person, residence, or other property when required by your probation officer.

16) You must comply with all reasonable requests by your probation officer.

17) You must make a good faith effort to obtain your G.E.D., if applicable.

SPECIAL CONDITIONS

☒ - No unsupervised contact with minors

☒ - Register as a sex offender and comply with registration requirements

Probation/Parole Office

1001 West Walnut Street
Rogers, AR 72758

(479) 878-2000

ACKNOWLEDGEMENT

I hereby certify that I have read, do understand and will comply with the terms and conditions of my probation. I understand that if I violate any of the conditions set out in this agreement, the court can revoke my probation and impose any sentence on me that it might have imposed originally for the offense for which I was declared or plead guilty.

Keishawn Brown
Defendant
Dated: 8/17/2026