

PLEA FORM

Please Print or Type:

Name: _____ Cause #: _____
(as it appears on license)

Mailing Address: _____

City _____ State _____ Zip Code _____

Home #: () _____ Work #: () _____ Cell #: () _____

Email: _____

Offense: _____ Date of Citation: _____

DOB: _____ Driver License #: _____

Check One:

- ☐ 1. I hereby enter a plea of GUILTY and waive appearance for trial.
- ☐ 2. I hereby enter a plea of NOLO CONTENDERE/No Contest and waive appearance for trial.
- ☐ 3. I hereby enter a plea of NOT GUILTY and waive my right to a jury trial and request a trial by judge.
- ☐ 4. I hereby enter a plea of NOT GUILTY and request a trial by jury.

I affirm that the above-information is current and true.

Dated: _____, 20____

Signature