PLEA/STANDARD PAYMENT FORM

Name:	Cause #		Verify
	Offense		
Street Address/City/State:	Cause #		
	Offense		
Mailing Address if Different from above:	Cause #		
	Offense		Verify
Home # & Cell #:	Cause #		
	Offense		
Email Address: * I consent to having correspondence sent by email_____*	Cause #		
	Offense		

SHOULD YOUR ADDRESS CHANGE, IT IS YOUR RESPONSIBIITY TO INFORM THE COURT, IN WRITING, OF YOUR CURRENT ADDRESS. PLEASE CHOOSE YOUR PLEA:

_____ I enter a plea of NOLO Contendere (No Contest)

OR

_____ I enter a plea of Guilty

A plea of Nolo Contendere (No Contest) means you are not contesting the charge filed against you and a plea of Guilty means you are admitting your guilt to the charge filed against you. If you enter a plea of no contest or guilty, the Court will enter a finding of guilt and you will be required to pay fines and court costs.

OR

_____ I enter a plea of NOT GUILTY and request:

_____ Trial by Judge (Thereby waiving my right to a Trial by Jury)

_____ Trial By Jury

I swear that I will appear before the Court at 712 S. Stagecoach Trl, Ste. 2235 San Marcos, Texas upon notice by the Court, or pay to the Court the principal sum of $ _____ plus all necessary and reasonable expenses incurred in any arrest for failure to appear.

Standard Payment Plan Summary

I, _____, defendant, understand and agree to the terms of the standard payment plan and acknowledge and agree that the following is true and correct:

1. I am able to pay $ _____ on or before the date my payment is due as described in the attached Standard Payment Plan Summary.
2. 2. I understand how much I owe, the dates that my payments are due, and how many payments I will need to make.
3. I understand that I can request collection staff to review my financial information (payment ability information) to see if I can have lower payment amounts or additional time to pay than what is listed in the attached Standard payment plan. I do not need or want collections program staff to review my financial information because I can successfully make the payments described in the attached payment plan.

A $15.00 payment plan fee will be due under the Standard Payment Plan if the entire fine and costs are not paid before the 31st day from judgment, pursuant to Texas Local Government Code, Section 133.103.

_____I hereby waive my right to an indigency hearing with the Justice of the Peace, Pct. 1-2.

_____Requesting deferred disposition to have case dismissed (conditions imposed by Judge)

_____ _____

Defendant's Signature Date:

_____ _____

Court/Collection Staff Name Court/Collection Staff Signature

_____ _____

Signature of Judge Comments: