

**IN THE MUNICIPAL COURT  
CITY OF ARANSAS PASS, TEXAS**

**THE STATE OF TEXAS  
VS.**

**Citation NO.** \_\_\_\_\_

\_\_\_\_\_

**PLEA FORM**

You have been charged with the offense of \_\_\_\_\_

You may enter a plea of contest, guilty, or not guilty.

A plea of no contest states you are not contesting the charges filed.  
If you plead no contest, a finding of guilty will be entered by the court and the Judge will set the amount of your fine.

**No Contest  
(nolo contendere)**

**Guilty**

A guilty plea states you are guilty of the charge as filed. The fine and costs on a plea of guilty are the same as a plea of no contest

A not guilty plea states you are not guilty of the charge as filed.  
If you plead not guilty, a trial date will be set. You are required to appear for trial. Failing to appear may result in you being charged with Failure to Appear (Sec.38.11 PC) and a warrant being issued for your arrest. **YOU HAVE THE RIGHT TO HIRE AN ATTORNEY.** The State is represented by the City Attorney. **NOTICE OF YOUR COURT DATE WILL BE MAILED TO THE MAILING ADDRESS YOU HAVE LISTED BELOW.**

**Not Guilty**

**IN REGARDS TO THIS CHARGE SELECT ONE BELOW:**

- ( ) I hereby enter a plea of NOT GUILTY and request a non-jury trial and do hereby waive my right to a trial by jury.
- ( ) I hereby enter a plea of NOT GUILTY and request a trial by jury.
- ( ) I hereby enter a plea of GUILTY and do hereby waive my right to a trial by jury.
- ( ) I hereby enter a plea of NOLO CONTENDERE and do hereby waive my right to a trial by jury.
- ( ) I hereby enter a plea of NOLO CONTENDERE and request Deferred Disposition.
- ( ) I hereby enter a plea of NOLO CONTENDERE and request a Driving Safety Course.

**Defendant's Signature :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Defendant's Attorney Signature :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Driver's License No. or I.D No.:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Social Security No:** \_\_\_\_\_

**Home Address and APT#:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address if different:** \_\_\_\_\_

**Work Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_