

OPTION 1 PLEAD NO CONTEST OR GUILTY AND PAY FINE

APPEAR IN PERSON

Come to the Rosebud Municipal Court Office during business hours. Monday-Friday 8:00 am to 5:00 pm. Closed for lunch
Please keep in mind the Judge is only here on the Appearance date on your citation. **Court starts at 9:00 am.**

APPEAR BY MAIL

You may submit your payment & plea by mail (not applicable to juveniles.) Payment type: **Cashier's Check or Money Order, Payable to Rosebud Municipal Court, or pay on our web page at www.rosebudtexas.us. NO PERSONAL CHECKS, NO PHONE PAYMENTS**

Plea of Nolo Contendere

I, the undersigned, do hereby enter my appearance on the complaint of the offense, to wit:

_____, charged in Municipal Court Citation Number _____.

(Violation)

I understand that I have a right to a jury trial and that my signature on this plea of nolo contendere (meaning "no contest") will have the same force and effect as a plea of guilty on the judgment of the Court. I do hereby plead nolo contendere to said offense as charged, waive my right to a jury trial or hearing by the Court, and agree to pay the fine and costs the judge assesses. I understand that my plea may result in a conviction appearing on either a criminal record or a driver's license record.

Plea of Guilty

I, the undersigned, do hereby enter my appearance on the complaint of the offense, to wit:

_____, charged in Municipal Court Citation Number _____

(Violation)

I understand that I have a right to a jury trial. I do hereby plead guilty to the offense as charged, waive my right to a jury trial or hearing by the Court, and agree to pay the fine and costs the judge assesses. I understand that my plea may result in a conviction appearing on either a criminal record or a driver's license record.

I understand that I have a right to file an appeal, with the court, within 10 (ten) days from the judgment date on this case. (The judgment will be entered on the date of your plea.) By entering a plea of guilty or nolo contendere by mail you are declining to request discovery of evidence in your case.

Under penalty of perjury _____

Defendant's Signature

_____ **Date**

_____ Print Name

Current Mailing Address

City, State and Zip

THE PLEA FORM MUST BE SIGNED BY THE DEFENDANT and into the court by the appearance date on your citation.

(Over)

OPTION 2 PLEAD NOT GUILTY & REQUEST A PRE-TRIAL

Plea of Not Guilty

I, the undersigned, do hereby enter my appearance on the complaint of the offense, to wit: _____, charged in Municipal Court Citation Number _____. I plead not guilty.

Initial One:

_____ I want a jury trial.

_____ I waive my right to a jury trial and request a trial before the Court.

I promise to appear, in person, in the Rosebud Municipal Court on any date for which this case is scheduled before this Court. I understand that if I do not appear anytime, a Failure to Appear charge may be filed and warrants may be issued for my arrest.

Signature _____ **Date** _____