Mail To:	Somerset Municipal Court 110 Spring Street PO Box 313 Somerset, WI 54025
Fax To:	(715) 247-2475
Email To:	court@villageofsomerset.us
NAME:	COURT DATE:
Address (in	nclude city, st & zip):
Phone:	Email:
Citation N	umber(s):
Return Pl	ea Sheet at least 72 hours before your scheduled court date.
Please <mark>D</mark> (	<b>O NOT</b> check more than one choice below (1 – 4):
1	I hereby enter a plea of <b>guilty</b> to the charge stated on the above citation(s) and request time to pay the amount due. You <u>will not</u> appear in court after you enter this plea.
2	I hereby enter a plea of <b>no contest</b> to the charge stated on the above citation and request time to pay the amount due. You <u>will not</u> appear in court after you enter this plea.
	ad guilty or no contest, <i>you will be found guilty and a forfeiture will be imposed</i> . If you have information you ourt to consider when imposing the forfeiture, please provide it here:
A disposit	ional sheet will be sent out in the mail detailing conviction, forfeiture amount owed, and further ordered by the Court. You will be given 60-days to pay with a hearing date to appear if you need more
	I hereby enter a plea of not guilty to the charge(s) stated above and request a Pre -Trial conference with the Village Attorney (prosecutor). Pretrials will be held in person and a Notice will be sent to you Note: if you would like to <i>plea not guilty via the web submission</i> visit <u>villageofsomerset.us/somerset municipal court</u> under commonly used court forms.
	Or appear on <b>your court date,</b> (located at the top of your citation). All appearances are being held in person at the Village Hall, 110 Spring St, Somerset, WI 54025.
	Signature: Date:

See website for explanation of pleas, or contact the court office with questions.

Colleen M. Heintz Municipal Court Clerk Phone: (715) 247-1208

This form is also available as a fillin form online.