PLEA SHEET

TO COMPLETE THIS FORM YOU MUST BE AT LEAST 17 YEARS OF AGE AT THE TIME OF THE OFFENSE AND THIS IS YOUR FIRST ALCOHOL RELATED OFFENSE.

Please indicate which offense you are entering your plea for.

☐ Minor in Possession of Alcohol ☐ Consumption of Alcohol by a Minor ☐ Attempt to Purchase Alcohol by a Minor
☐ Purchase Alcohol by a Minor ☐ Misrepresentation of Age by a Minor ☐ Public Intoxication by a Minor
☐ Driving Under the Influence of Alcohol by a Minor*

Defendant's Name: _____ CASE #: _____

or

Mailing Address: _____ TICKET #: _____

_____ ST - DL #: _____

A plea of GUILTY must be entered in open court and therefore you must schedule a hearing.

Please be advised failure to enter your plea by the due date given to you on your ticket/citation will result in a warrant being issued for your arrest.

☐ I plea NOLO CONTENDERE (no contest) and waive my right to a jury trial. I understand by pleading NOLO CONTENDERE I will be required to do the following:

☐ This is my 1st Alcohol Related Offense and I am requesting Deferred Disposition.

⇨I have enclosed $220.00 – due immediately (*Money Order or Cashier's Check only)* ⇨I understand I must complete 8 *(20) hours of Community Service within _____

⇨understand I must complete an Alcohol Awareness Course within 90 days

⇨I understand at the end of my deferral period I must turn in a signed and notarized Affidavit Of Compliance stating I have had no further violations against the law during the 90 days

☐ This is my 2nd Alcohol Related Offense and I understand that Deferred is not an option and That I will be required to complete the following:

⇨I have enclosed $220.00 – due immediately (*Money Order or Cashier's Check only)*

⇨I understand my right to drive or to get a driver's license will be suspended 30 days Beginning 10 days from the date my plea is entered

⇨I understand I must complete 20 *(40) hours of Community Service within 90 days

⇨I understand I must complete an Alcohol Awareness Course within 90 days

☐ I plead NOT GUILTY. I understand by pleading Not Guilty I will be required to appear at a later date for a Pre-Trial Hearing to discuss the case before a District Attorney. I may choose to fax my Not Guilty plea to 979-542-0234, however I understand I must call the Court to confirm the plea was received.

_____ _____ *(attach copy of Driver's License or ID)*

DEFENDANTSIGNATURE DATE

Justice of the Peace, Pct. 2 at 200 S MAIN ROOM 114, GIDDINGD, Texas 76262 979-542-3030