

*****PLEASE PRINT LEGIBLY*****

ATTORNEY INFORMATION

ATTY NAME _____

BAR # _____

PHONE NUMBER _____

PLEASE CHECK: RETAINED _____ APPOINTED _____

DEFENDANT INFORMATION

NAME _____ CAUSE#: _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ DATE OF BIRTH _____

DRIVERS LICENSE NO. _____ STATE _____

PLEASE CHECK: COLLECTIONS _____ CASHIER _____

WHICH JUDGE COMPLETED PLEA?
