REQUEST FOR PAYMENT PLAN (additional fee of \$15 will be added for payment plan per State)

\*YOU WILL NEED TO FILL OUT THE ATTACHED PLEA FORM AND SEND BACK WITH REQUEST\*\*

Citation #		
Name:		
Mailing addres	ss:	
Physical addre	ess (if different):	
Phone numbe	r:	Alt Phone:
of this pament	t plan, my paym	ns are approved at the sole discretion of the Judge. I understand that upon approva ents will be due according to the agreed payment terms. I also understand that if I yment can be in default and a Capias Pro Fine (Warrant) may be issued for my
Furthermore,	I understand tha	t an initial payment is required upon approval of Payment Plan Request.
Schedule of Pa	ayments reques	ted:
Weekly	\$	(payment amount)
Bi-Weekly	\$	(payment amount)
Monthly	\$	(payment amount)
Defendant Sig	nature;	
	ve an approved a t the court to fol	greement signed by the Judge in the mail, if you do not receive within 30 days, lowup.
**************************************	If you have an ex ****	isting warrant, please contact the court to make arrangments for the warrant to be
Gilmer Munici	ipal Court	
PO Box 760, G	ilmer, TX 75644	
903-843-2751		
Njackson81@c	etex.net	

STATE OF TEXAS	<b>§</b>	(print the citation number)	
VS.	<b>§</b>		
	<b>§</b>	OFFENSE DATE:	
Defendant (print your name)		(print the date of offense)	
	Plea Form		
For the offense of	nse listed on the citation,	I wish to enter a plea of:	
Guilty/Culpable			
assessed. I understand th	at my piea may result in urthermore, if I have poste	Court, and agree to pay the fine and costs a conviction on either a criminal record or a ed a cash bond, I give my permission to apply ber listed above.	
No Contest/Ninguna Competencia			
assessed, I understand that	it my plea may result in a urthermore, if I have poste	Court, and agree to pay the fine and costs a conviction on either a criminal record or a ed a cash bond, I give my permission to apply ber listed above.	
☐ Not Guilty/No Culpable			
By pleading Not Guilty I v	nderstand I am no longer	cligible for a Driver Safety Course.	
☐ I want a jury trial. ☐ I waive my right to a ju	my trial and request a trial	before the Court.	
I have read and understand my plea. Signed	d this day of	, 20	
Defendant <i>(sign your name)</i>	**************************************		