



**JUDGE SHERWOOD "WOODY" KUPPER**

JUSTICE OF THE PEACE, PCT. 3  
ECTOR COUNTY  
300 N GRANT, RM 208  
ODESSA, TX 79761  
(432) 498-4203

**PLEA FORM**

REV. 01.04.05-01A

NAME: \_\_\_\_\_ CASE #'S: \_\_\_\_\_  
OFFENSE(S): \_\_\_\_\_  
\_\_\_\_\_

YOU ARE THE DEFENDANT IN A CRIMINAL CASE. BEFORE THE CASE CAN PROCEED, YOU MUST ANSWER TO THE CHARGES AND ENTER A PLEA. YOU HAVE THE RIGHT TO SEEK THE COUNSEL OF AN ATTORNEY AND HAVE THAT ATTORNEY PRESENT PRIOR TO ENTERING A PLEA.

ENTER A PLEA BELOW BY CHECKING THE APPROPRIATE BOX:

**NO CONTEST**                       **GUILTY**                       **NOT GUILTY**

BY ENTERING A PLEA OF NOT GUILTY, YOU UNDERSTAND THAT THE COURT WILL SET YOUR CASE FOR PRETRIAL. YOU HAVE THE RIGHT TO REQUEST A TRIAL BY JURY, IF YOU SO WISH. IF YOU WAIVE YOUR RIGHT TO A JURY TRIAL, YOUR CASE WILL BE TRIED BEFORE THE JUDGE.

I WAIVE MY RIGHT TO A JURY TRIAL AND REQUEST A BENCH TRIAL

I DO NOT WAIVE MY RIGHT TO A JURY TRIAL

**YOU MAY BE ABLE TO RECEIVE DEFERRED ADJUDICATION IF YOU MEET THE FOLLOWING REQUIREMENTS:**

- YOU POSSESS A VALID TEXAS DRIVER'S LICENSE OR PERMIT
- YOU CAN PROVIDE PROOF OF FINANCIAL RESPONSIBILITY (I.E., AUTO INSURANCE)
- YOU WERE NOT SPEEDING 25 MPH OR MORE ABOVE THE POSTED SPEED LIMIT
- YOU DID NOT PASS A STOPPED SCHOOL BUS
- YOU WERE NOT IN A CONSTRUCTION ZONE WITH WORKERS PRESENT AT THE TIME OF THE OFFENSE
- THERE WAS NOT AN ACCIDENT INVOLVED
- YOU HAVE NOT COMPLETED A DRIVER'S SAFETY COURSE WITHIN THE PRECEDING 12 MONTHS

PLEASE INDICATE IF YOU ARE INDIGENT – **INDIGENT MEANS THAT YOU CANNOT AFFORD TO PAY THE FINES OR POST A BOND AND WOULD LIKE AN ALTERNATIVE MEANS OF DISCHARGING THE FINES ASSESSED.** (suffering from extreme poverty)

ARE YOU INDIGENT, AS DEFINED ABOVE?

**YES, I AM INDIGENT**                       **NO, I AM NOT INDIGENT**

**DEFENDANT'S INFORMATION:**

HOME ADDRESS                      STREET                      APT. #                      CITY                      STATE                      ZIP

WORK ADDRESS                      STREET                      STE. #                      CITY                      STATE                      ZIP

MAILING ADDRESS IF DIFFERENT FROM ABOVE (THIS IS THE LOCATION WHERE ANY NOTICES ARE TO BE MAILED)

DRIVER'S LICENSE OR ID #                      STATE                      HOME PHONE #                      WORK PHONE #

RACE                      SEX                      CELL PHONE #                      DATE OF BIRTH

**I, THE DEFENDANT, DO HEREBY STATE THAT THE INFORMATION ABOVE IS TRUE AND CORRECT, UNDER PENALTY OF LAW. I UNDERSTAND MY RIGHTS AND OBLIGATIONS AS SET FORTH ON THIS FORM. MY PLEA IS ENTERED KNOWINGLY AND VOLUNTARILY AND WAS COMPLETED OUTSIDE THE PRESENCE OR SUPERVISION OF ANY PEACE OFFICER.**

DEFENDANT'S OR ATTORNEY'S SIGNATURE

DATE

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