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200 W. Main P.O. Box 394 Hallsville, Texas 75650

Name: \_\_\_\_\_\_
Phone No: \_\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Case Number: \_\_\_\_\_

I, \_\_\_\_\_ request Deferred Adjudication, for the reasoning of:

Submitted to the court on the \_\_\_\_ date of \_\_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_