

JUSTICE COURT
SUSIE SPELLINGS
PRECINCT 5, PLACE 1
BOWIE COUNTY, TEXAS

PLEA SHEET

CASE NO. _____

DEFENDANT'S NAME: _____

PLEA ON CHARGE OF: _____

You have been charged with _____, you may enter a plea of no contest, guilty, or not guilty.

CHECK ONE

_____ NO CONTEST

A plea of *no contest* states you are not contesting the charges filed. If you plead no contest, the finding of guilt will be entered by the court and your fine and costs of court will be \$_____. **(NO PERSONAL CHECKS ACCEPTED)**

_____ GUILTY

A *guilty* plea states you are guilty of the charges as filed. The fine and costs on a plea of guilty are the same as plea of no contest. A guilty plea may adversely affect you in the event a civil action is brought against you.

_____ NOT GUILTY

A *not guilty* plea states you are not guilty of the charge as filed. If you plead not guilty a trial date will be set. You are required to appear for trial. Failing to appear may result in your being charged with Failure to Appear (Sec. 38.10, Penal Code) and a warrant being issued for your arrest. It is not required that you be represented by an attorney; however, you may elect to do so. Should you be found not guilty, you would be released at that time from the charge against you.

NOTICE OF YOUR COURT DATE WILL BE MAILED TO THE ADDRESS YOU HAVE LISTED BELOW.

I REQUEST: _____ NON- JURY BENCH TRIAL _____ JURY TRIAL

_____ I DO NOT WISH TO ENTER A PLEA AT THIS TIME. I UNDERSTAND THAT A PLEA OF NOT GUILTY WILL BE ENTERED FOR ME AND I MUST APPEAR FOR TRIAL AT THIS COURT.

CHECK ONE IF YOU HAVE ENTERED A PLEA OF GUILTY OR NO CONTEST

_____ I AM NOT INDIGENT, BUT I REQUEST THAT I BE ALLOWED TO PAY OUT BY INSTALLMENTS, THE FINE(S) AND COSTS PURSUANT TO THE TERMS AND CONDITIONS SET BY THIS COURT.

A \$15.00 Time Payment Fee will be assessed on the 31st day after Judgment.

_____ I AM NOT INDIGENT, BUT I REQUEST THAT I BE ALLOWED TO PAY THE FINE & COSTS IN FULL ON OR BEFORE _____ 20____.

A \$15.00 Time Payment Fee will be assessed on the 31st day after Judgment.

_____ I AM INDIGENT AND REQUEST AN INDIGENCY HEARING. I REQUEST THAT I BE ALLOWED AN ALTERNATIVE SENTENCE AS PRESCRIBED BY THIS COURT.

Defendant's Signature

Date

Home Address Apt # City, State, Zip

Phone

Defendant's Email Address

Alternative Phone