

Defendant's Name: _____

CITATION No(s). _____

Offense(s): _____

Date of Birth: _____ DL# _____

You must mail this notice within 22 days from the date of the citation.

30 DAY EXTENSION TO PAY FINE

NOW COMES the Defendant and enters a plea of NO CONTEST/GUILTY. The Defendant is waiving the right to a trial by jury or judge, to a Driving Safety Course, and Deferred Disposition. I understand a guilty conviction for the offense(s) charged will be added to my record and may result in a State surcharge (Texas Motor Vehicle Safety Responsibility Act).

NOTE: Total amounts due of less than \$250 are not eligible for payment plans.

The defendant may at any time before the due date request a payment plan:

You will be required to:

1. Fill out a Pay Plan Application with Collection/Warrant Clerk
2. Must provide a state issued DL/ID at time of request
3. And be advised that each violation on a Pay Plan is subject to a \$25 time payment fee
4. An initial payment of \$125.00 is due at the time of the request for a payment plan.

I SAID DEFENDANT AGREE TO THE ABOVE TERMS, AND UNDERSTAND THAT IF I FAIL TO MAKE PAYMENTS AS AGREED, THE EXTENSION CANNOT BE REINSTATED.

With no further notice a Capias Warrant will be issued for my arrest and a \$50.00 warrant fee will be added to the remainder of the balance.

Defendant Signature

Date

Defendant Address

City, State Zip

Phone Number