PLEA FORM

THE STATE OF TEXAS	8	IN THE JUSTICE COURT	
VS	§ §	PRECINCT 1	
		HILL COUNTY, TEXAS	
You have the right to be represented by an attor You have the right to a speedy trial. You have defense at trial. You have the right to confron testify on your behalf. You have the right to rem	the right to pre-trial discort the witnesses against you	very, including any evidence that may aid 1. You have the right to subpoena witness	l your
I am charged with:			
1. Plea of Guilty / No Contest			
Entering a plea of guilty or no contest may result You should contact an attorney if you have que Transportation Code provides that the Text license following a conviction for certain of the concerns regarding this issue.	estions or concerns regard as Department of Public	ing this issue. Additionally, the Safety may suspend Defendant's driv	er's
Do not complete this section unless you underst contest plea. If you do not understand this for guilty or the special plea of double jeopardy, Sk	m, you should contact an at		
I, Defendant, in this case, waive my right to a just result in a criminal conviction and that a fine a sobligated by law to satisfy court's judgment. Guilty Nolo Contendere ("No Contest")	ind court costs may be asse	· -	
2. Plea of Not Guilty:			
Entering a plea of "not guilty" means that you and does not waive your rights. It does not pre		-	ou
 I, Defendant, in this case, plead not guilty to the Exercise my right to a jury trial. Waive my right to a jury trial. By waive evidence in this case and determine when the state of the state of	ng this right, I understand	that I am electing to have the Court hear t	the
I understand that I am required to appear on the Court may result in additional criminal charge requiring me to pay the costs of impaneling a judriver's license.	s and the issuance of a wa	arrant for my arrest, the issuance of an or Public Safety denying the renewal of my T	order
Defendant's Signature		Date Signed	
Address	City:	State: Zip Code:	
Phone Number:	Email:		

Driver's License / ID Number: _____ State Issued: ____ Date Of Birth: ____ / ____ /