Deferred Disposition

Request Form

Citation #: _____

Offense: _____

I _____ **hereby enter a plea of:**

Guilty or Nolo Contendere (circle one)

To the above referenced citation/offense and request that I be granted deferred disposition.

Contact Information:

_____ _____ _____ _____

Address ***City*** ***State*** ***Zip Code***

_____ _____ _____

Cell Phone ***Home Phone*** ***Work Phone***

_____ _____ _____

Defendant's Signature ***Date of Birth*** ***Date***