

Ticket Number: _____

APPEARANCE PLEA OF GUILTY AND WAIVER

I, the undersigned, do hereby enter my appearance on the complaint of the offense charged on the other side of this ticket. I have been informed of my right to a trial, that my signature to this plea of guilty will have the same forced and effect as a judgment of the court and that this record will be sent to the Secretary of State (or of the State where I received my license to drive.) I do hereby PLEAD GUILTY to said offense as charged, WAIVE my right to a HEARING by the court, and agree to pay the penalty prescribed for my offense.

NOTE:
IN SANGAMON COUNTY YOU CANNOT PLEAD "NOT GUILTY" BY MAIL.
A COURT APPEARANCE IS REQUIRED IN ORDER TO PLEAD "NOT GUILTY"

Defendant's Signature: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date: _____

Mail to:

Attention: Traffic Division

Anthony P. Libri, Jr., C.G.F.M.
Clerk of the Circuit Court
P.O. Box 2119
Springfield, IL 62701