| | CAUSE NUMBE | CR(S): | | | | |
|---|---|----------------------------------|---------------------------------------|---------------------------|---|--------------------------|
| STATE OF TEXAS VS. | | | | | IN THE MUNICIPAL COURT CITY OF WHITESBORO | |
| | | | | | | COUNTY, TEXAS |
| Personal Information | | | | | | |
| Name: | | | Phone N | umber: | | <u>.</u> |
| Physical Address: | AP | Т# | City | | State | Zip |
| Mailing Address: | AP | T# | City | | State | Zip |
| Date of Birth: | DL/ID# | | St | ate | | |
| Employer: | | | Job Title: | | | |
| Employer's Address: | | | | Phone | Number | |
| Salary \$ | [] Weekly [] Bi-w | eekly [] N | Ionthly * I l | have | dependan | ts that live with me. |
| Marital Status (Check One): | [] Single [|] Married | [] Separate | ed | [] Divorced | [] Widowed |
| Spouse's Name: | | Spo | use's Phone N | umber:_ | | |
| Spouse's Employer: | | Spou | se's Job Title:_ | | | |
| Spouse's Salary \$ | [] Weekly | [] Bi-we | eekly [] N | Monthly | | |
| List two (2) Names of friend 1. Name: | - | | • | | • | |
| Relationship2. Name: | | Phor | e Number: | | | |
| My family's total gross incom ☐ Less than \$11,225 | me per year before tax | xes is (CHEC | | n \$19,07 | 5 □ Le | ss than \$23,000 |
| YOUR INITIAL BY EACH OF T UNDERSTAND IT, AND AGRE | | TEMENTS IN | DICATES THAT | Γ YOU HA | VE READ THE S | TATEMENT, |
| I promise that until my find or telephone number at the follow | • | • | - | • | | |
| I UNDERSTAND THAT I COURT OF ANY CHANGES I HELP ME SATISFY THE JUD | IN MY FINANCIAL ST | | | | | |
| I understand that if I pay a paying a \$15 time payment fee. | ny part of the fine and co | osts on or after | the 31 st day aft | er judgme | nt was entered th | at I am responsible for |
| I understand that submittin punishable by incarceration and | | | | ne crime o | f tampering with | a governmental record, |
| If community service, or a payn first be entered, and that by doin may be reported to DPS. If this I swear that all the information | ng so you are not only wa is how you would like t | niving your rig o proceed, pl | tht to a trial by j ease check one | ury or jud : □ Guilt | ge, but also that a | conviction on the ticket |
| Date: | Defendant's Signatu | ure: | | | | |

^{*}PLEASE PROVIDE ALL REQUIRED DOCUMENTATION AT THE TIME OF REQUEST.