

IN THE COUNTY COURT OF THE SECOND JUDICIAL CIRCUIT,
IN AND FOR JEFFERSON COUNTY, FLORIDA

State of Florida

Citation Number: _____

Vs

_____/_____
Defendant

I WISH TO PLEAD NOT GUILTY TO MY TRAFFIC CITATION.

_____ I WILL ATTEND THE HEARING IN PERSON

_____ I WILL NOT BE ABLE TO ATTEND THE HEARING IN PERSON AND
WILL BE FILING AN AFFIDAVIT OF DEFENSE

MY CURRENT MAILING ADDRESS:

EMAIL ADDRESS _____

CURRENT PHONE NUMBER: _____

DRIVERS LICENSE NUMBER: _____

NAME: _____

(please print)

Signature

Date

Jefferson County Clerk of Court
1 Courthouse Circle
Monticello, FL 32344
Fax 850-342-0222

wbailey@jeffersonclerk.com

All request **must** be submitted as **pdf**

NO jpeg or tiff images will be accepted