

CHIPPEWA COUNTY CLERK OF CIRCUIT COURT

DEFENDANT'S NOTICE OF PLEA

I have received a citation from: \_\_\_\_\_  
Name of Issuing Agency (Line 26 or Plaintiff box on citation is the issuing agency)

I wish to plead **NOT GUILTY**.

Defendant's signature (required for a NOT GUILTY plea)	Date
	\$
Defendant's Name PRINTED	Bond Amount
CURRENT Street Address if different than on the citation	Court Date
City State Zip Code	Citation Number
Daytime Telephone SSN	Date of Violation

You are required and it is your responsibility to inform the **Clerk of Courts Office** of your current address until all proceedings have been completed.

Failure to make a plea in writing or to appear in court by the scheduled court date will result in a conviction and a forfeiture being entered against you.

If you are found guilty and you fail to pay, statutory enforcement actions will be taken against you and your debt will be certified to the Department of Revenue for interception of your tax refund due to the voluntary disclosure of your social security number.

**Return this form to the Clerk of Courts Office or place it in the hallway drop box.**

**NOTE: A representative of the agency who issued your citation or the agency's attorney will contact you after receiving this notice. Response time may vary depending upon the agency.**