

CITY OF BEND,	
Plaintiff	
vs.	
Defendant	

CITATION NO. _____

PLEA OF "NOT GUILTY/CONTESTING",
 and REQUEST FOR TRIAL

Name		Date of Birth
Mailing Address	City, State	Zip
Telephone No.	Alternate Telephone No	

I plead "Not Guilty" to each of the violations or I am contesting each of the infractions listed below:

- A) _____
- B) _____
- C) _____

Read and initial each of the following:

I understand that:

_____ I waive the opportunity to participate in Traffic Safety School, the "fix-it" program or any other Court program that might have resulted in a dismissal of this violation/infraction.

_____ The fine amount on my citation will not be reduced if I am found guilty or the infraction is upheld at trial. The Court may impose the maximum fine at trial, up to \$2000.00 in some cases.

_____ I must notify the Court of changes to my mailing address or telephone number.

_____ I am encouraged to seek legal counsel and/or read the Oregon Revised Statute (ORS) or City Code for the violation/infraction that I have been charged with so that I will know the elements that need to be proven to find me guilty and to know what my **legally recognized*** defenses are.

_____ If I will be represented by an attorney, a Notice of Representation must be filed with the Court and served upon the Department that issued the citation at least 14 days before my scheduled trial date.

_____ If I do not receive my trial notice within 14 days, I will call the Court office at 541-388-5572 option #9 to obtain my trial date and time.

IN-PERSON TRIAL: I request an **In-Person Trial**. Written notice of my trial date will be mailed to me at the mailing address I have provided to the Court (above).

TRIAL BY AFFIDAVIT/DECLARATION: I request a **Trial by Affidavit/Declaration** and I waive my right to have testimony presented orally in Court.

*** Oregon Revised Statute (ORS) 9.160 prohibits Court Clerks from providing legal advice.**

Signature _____ Date _____