

PRE-TRIAL REQUEST

I, _____ enter a plea of not guilty

for the offense of _____

Docket # _____ and _____

request a pre-trial hearing

NAME (PRINT): _____

MAILING ADDRESS: _____

CITY _____ STATE _____ ZIP _____

HOME TELEPHONE: (_____) _____

PLACE OF EMPLOYMENT: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

WORK TELEPHONE: (_____) _____

DRIVER'S LICENSE #: _____ ISSUING STATE: _____

TEXAS I.D. #: _____ SOCIAL SECURITY #: _____

DATE OF BIRTH: _____ RACE _____ GENDER _____

I understand that the above information will be used to contact me regarding this cause and will be used for purposes of my plea. I also understand that it is my responsibility to inform the court of any changes in the above information until the above numbered cause is finally disposed of. I also understand that should I make any false statements on this document and file it with said court that constitutes a crime with which I may be charged. Therefore I swear that the above information is true and correct.

Signature

Date