OPTION 1 – Guilty/Responsible Plea INSTRUCTIONS FOR PAYING BY MAIL

This signed, completed form and a copy of your citation must be received in court along with the full payment on or before the appearance date shown on your citation or additional fees will be assessed, default judgment may entered, your case may be sent to a collection agency, a warrant for your arrest may be issued and additional charges may be filed against you.

1. Enter the bond amount for each charge as listed on page 8 or shown on the overweight or other bond schedule.

1/A:\$	2/B:\$	3/C:\$	4/D:\$
5/E: \$	plus \$20.00 p	avment fee if requir	red (see below) Total \$

If the violation code is not shown on the schedule, you must contact the court.

MINIMUM \$20.00 FEE MAY BE ASSESSED ON ALL Α FINES/SANCTIONS WHICH ARE RECEIVED IN THE COURT AFTER THE APPEARANCE DATE SHOWN ON THE COMPLAINT.

2. Purchase a money order (U.S. funds only) PAYABLE TO OUARTZSITE JUSTICE COURT for the total shown above; write the complaint number (shown in the upper right corner of the citation) on the money order and mail it along with this signed ,completed form to the court. NO CASH, PERSONAL CHECKS, OR COMPANY CHECKS ACCEPTED. A \$25.00 fee will be charged for all money orders or cashier's checks the court is unable to collect on. If payment receipt is required, enclose a stamped, self addressed envelope.

3. Complete the following information:

Print Name:	Date of Birth:
	0 0 11

Citation Number: ______Soc. Sec. #_____ Daytime Phone # (____)____ Mailing Address: _____

Email Address: 4. Read and sign the following statement: I hereby waive my right to a trial/hearing, enter a plea of guilty / responsible, and consent to judgment imposing the prescribed fine/sanction. I further understand Motor Vehicle Division will be notified of the finding of guilty/responsible and points may be assessed to my driving record for any moving violations. I am enclosing the prescribed fine. I do not want a hearing/trial. (If you use this option, the case is completed and you do not have to appear in court.)

Sign Here:

5. This signed page, a copy of your citation, and your money order must be received in the court prior to the appearance date shown on your citation. MAIL to address on bottom of Option 2

IMPORTANT: DO NOT RELY ON ANY OTHER PERSON, INCLUDING YOUR COMPANY, TO HANDLE THIS. If you fail to appear (FTA), or complete option 1 or 2 and do not pay the fines/fees/bond by the date shown on your citation, your driving privileges will be suspended, a warrant for your arrest may be issued, and a FTA complaint may be filed against you resulting in additional fines, fees, and jail time.

OPTION 2 – Not Guilty/Not Responsible Plea INSTRUCTIONS FOR REOUESTING A HEARING/TRIAL

This completed form must be received in court prior to the appearance date shown on vour citation.

1. Circle the letter of the charges(s) for which you are requesting a hearing/trial and enter the bond amount as shown on the reverse of this form.

1/A:\$	2/B:\$	3/C:\$
4/D:\$	5/E: \$	Total \$

2. Purchase a money order payable to QUARTZSITE JUSTICE COURT for the total shown above and mail it along with this completed form to the court. If you are adjudged not guilty or not responsible the bond will be refunded to you. NO PERSONAL CHECKS, NO COMPANY CHECKS, OR CREDIT CARDS WILL BE ACCEPTED FOR BONDS.

3. Read and sign the following statement: I request a hearing/trial to contest the violation(s) indicated above. I enter a plea of not responsible/not guilty. I understand I am giving up my option to attend a defensive driving/traffic safety school for the violation. I further understand that if I fail to appear for the hearing/pretrial/trial as ordered by the Court, I am giving up the right to be present for that proceeding, the proceeding may take place in my absence, a warrant for my arrest may be issued, default judgment may be entered against me on any civil traffic violation, my bond may be forfeited to the County, the case may be sent to a collection agency, additional fees may be assessed, failure to appear charges could be filed against me, and my driving privileges may be suspended. I further understand it is my duty to keep the court informed of any change of my mailing address.

Sign Here:

Sigli nele		
Print Name:	Date of Birth:	
Citation Number:	Social Security #	
Daytime Phone # ()		
Email Address:		
Interneton Mandad Van	No. Longuage Deguasted.	

Interpreter Needed _____Yes ____No Language Requested:_____

4. Detach this page and mail it, along with your payment and a copy of the citation to the court. You will be notified by mail of your next appearance date. If you comply with all of the above requirements, you will not need to appear at the court on the date shown on the citation; you will be notified by mail of your next appearance date. Note: you may also appear at the court on or before the appearance date shown on the citation to request a hearing or trial without posting bond. Send to:

QUARTZSITE JUSTICE COURT 555 N. PLYMOUTH, P.O. BOX 580 **QUARTZSITE, AZ 85346-0580** Court: 928-927-6313 Fax: 928-927-4842 Email: qjusticemail@courts.az.gov

Info & to Pay: 1-855-741-7783 www.quartzsitejusticepayments.com