WRIGHTSTOWN MUNICIPAL COURT

352 High Street, Wrightstown, WI 54180 920-532-5547 FAX 920-532-4996

STATE OF WISCONSIN

BROWN/OUTAGAMIE COUNTY

PLEA SHEET

This Plea Sheet is due prior to your scheduled court date if you choose not to appear before the Judge

Name:		Date of Birth:
Mailing Address:	Apt #:	City/State/Zip:
Phone:	Email:	
Social Security #: [Driver's Licen	se #:
Citation Number(s):		
Court date on Citation(s):		_
Please DO NOT check more than one choice below	<u>(1 – 3):</u>	
 I hereby enter a plea of guilty to the ch I hereby enter a plea of no contest to t 		· ,
If you plead guilty or no contest, you will be found information you want the court to consider when		·
If you choose option 1 or 2 above, a dispositional s		•
forfeiture amount owed, and further sanctions ord	lered by the (Court, if any.
3 I hereby enter a plea of not guilty to the sheet and Notice of Pre-Trial Conference will be metrial conference with the Village Attorney by te	nailed to you	
Signature:	Date:	

NOTICE OF ADDRESS CHANGE - You are required by law to notify the court in writing within 5 days of any change of your address during the pendency of your case(s).

NOTICE OF POVERTY - If you feel you are indigent or financially unable to pay your fines, you are entitled to an Indigence Hearing. It is your responsibility to request an Indigence Hearing in writing within 30 days of the payment due date. At the hearing, you will be required to provide documentation to show the court your financial status, as well as, tax returns from the last 2 years. If unable to pay due to poverty, you may request an installment payment, community service, or a stay of the judgment.