

IN THE COUNTY COURT, SEVENTH JUDICIAL CIRCUIT,
IN AND FOR ST. JOHNS COUNTY, FLORIDA

STATE OF FLORIDA

Case No.: _____

v.

Citation No.: _____

ADMISSION OF GUILT

I, _____, the undersigned defendant, do hereby plead guilty to the offense as charged. I understand that I am waiving my right to speedy trial, the option to attend traffic school or request a court date, and the right to exercise dismissal and reduce fine options. I further understand that I must pay the full statutory civil penalty, and I understand that my plea will result in a conviction on my driving record, and points will be assessed on moving violations.

DEFENDANT NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

DAYTIME PHONE #: _____

Signature

April 2, 2024

Date

St Johns County Clerk of Courts
4010 Lewis Speedway
St. Augustine, Florida 32084
Traffic Number: (904)819-3628
Traffic Email: traffic@stjohnsclerk.com