

NOT GUILTY PLEA FORM

I, _____, wish to plead NOT GUILTY to the charge(s) of:

CITATION NUMBER(S):

The appearance date listed on the citation is: _____ at 1:30 / 2:00 (circle one)
(Please note: there are no court appearances held for any traffic/ordinance-related offenses other than OWI 1st)

The citation was issued by: (check one please)

- Eau Claire Police Department
- Eau Claire Sheriff's Office
- Wisconsin State Patrol
- Other Agency (Please list) _____

I understand that by entering this plea of not guilty, I am requesting to meet with the prosecuting agency to potentially reach an alternative resolution to my citation(s). Once the appearance date has passed, my citations(s) will be held open and I will receive written notification of the pre-trial conference date and time at the address I have provided below.

Defendant's Signature

Address

Phone Number

Date