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| State of Alabama Unified Judicial System Form UTC - 7 Rev 8/97 | PLEA OF GUILTY/WAIVER OF RIGHTS (Plea Entered Before Magistrate Scheduled Traffic Offenses) | Case Number <hr/> UTC Number <hr/> |
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In the District Court of _____, Alabama
 (Name of County)

In the Municipal Court of _____, Alabama
THE STATE OF ALABAMA
 or
 CITY/TOWN OF: _____ v. _____
 (Defendant)

NOTICE TO THE ABOVE NAMED DEFENDANT:

State law prohibits magistrates from receiving pleas of guilty from anyone convicted of two or more traffic offenses in the preceding 12 months. If you have been convicted of two or more traffic offenses within the preceding 12 months, do not sign this plea of guilty. A false statement will subject you to penalties prescribed by law.

You are charged with the offense of _____. In accordance with the Rules of Judicial Administration, you may elect to plead guilty to this offense before a magistrate and pay a fine of \$_____ plus court costs of \$_____, for a total of \$_____.

PLEA OF GUILTY/WAIVER OF RIGHTS

YOU ARE HEREBY ADVISED OF YOUR RIGHTS AS A DEFENDANT IN THIS TRAFFIC CASE.

Please Read Carefully

I, the undersigned, do hereby enter my appearance on the offense charges within this complaint. I understand that I have certain constitutional rights which I will waive if I plead guilty, namely: the right to a trial before this court; the right to an attorney of my choice, or if I cannot afford one, one appointed by the court (however, I understand that I may be ordered to make reimbursement at a later date); the right at trial to subpoena witnesses on my behalf, to confront and cross-examine witnesses against me and to argue and make objections; and the right to testify in my own behalf. I also understand that I cannot be forced to testify against myself and that I am presumed innocent and that this presumption can be overcome only if the prosecution convinces the judge or jury of my guilt beyond a reasonable doubt.

I understand my constitutional rights set out above and the punishment that will be imposed if I elect to plead guilty before a magistrate. I also understand that my plea of guilty will have the same force and effect as a judgment of conviction by the court and that a record of this conviction will be sent to the driver license division of the Alabama Department of Public Safety (or of the state where I received my license to drive). This may result in the suspension or revocation of my driver's license and may adversely affect my ability to maintain and secure automobile insurance. I further understand that this conviction may result in enhanced penalties on subsequent convictions. I understand my rights and the matters set out above and hereby voluntarily and knowingly waive such rights by pleading guilty as evidenced by my signature below. I further state under penalty of law (Section 13A-10-109, Code of Alabama 1975), that I have not been convicted of two or more traffic violations during the preceding twelve months.

 Defendant's Signature Date

 Defendant's Name (Print or Type) Date