IN THE DESOTO COUNTY COURT, IN AND FOR THE TWELFTH JUDICIAL CIRCUIT, STATE OF FLORIDA

STATE O	F FLORIDA		
	Plaintiff,		
VS.		CASE NO.:	
v 5.		CITATION NO.:	
	Defendant.	DL NO.:	
	AFFIDAVIT OF ADMISSION AND WAIV		
Be who after f	efore me personally appeared first being placed under oath, swears, or	the Defendant in this cause, affirms as follows:	
1.	My name, address, and telephone nur	mber are:	
	Name:		
	Address:		
	Telephone No.:		
2.	violation(s): (List the charges as you u	renced case and am charged with the following inderstand them to be.)	
[N	Note: This is not an admission that you vi		
3.	Place your initials on only one as you	ır plea:	
	I hereby plead NOT GUIL	TY and file this affidavit of	
supply any appearance violation b	y further statement. I understand that e, and the judge will have to make a d	nd that when I plead not guilty, I do not have to by my filing this affidavit, I am waiving my lecision as to whether I committed the alleged other evidence, and my statement. I understand ring of this matter.	
	I hereby plead GUILTY a	nd file this affidavit as an explanation of what	

happened and as a statement that the hearing officer or judge can consider before pronouncing a sentence. I understand that I am not required to make any statement. I understand that the hearing officer or judge will determine the appropriate sentence and decide whether to adjudicate me guilty.
I hereby plead NO CONTEST and file this affidavit as an explanation of what happened and as a statement that the hearing officer or judge can consider before pronouncing a sentence. By pleading no contest, I understand that I am not admitting or denying that the infraction was committed but do not contest the charges, and I understand that I may be sentenced and found guilty even though I entered a plea of no contest. I understand that I am not required to make any statement. I understand that the hearing officer or judge will determine any appropriate sentence and decide whether to adjudicate me guilty.
4. Defendant's Statement: (additional papers, documents, photos, etc. can be attached but should be mentioned herein).
I understand that any material misrepresentation could cause me to be prosecuted for a separate criminal law violation.
Affiant/Defendant
5. If the Court rejects my AFFIDAVIT OF DEFENSE OR ADMISSION AND WAIVER OF APPEARANCE, I wish to (check one):
Pay the civil penalty within 30 days from the date of the Court's ruling.
Pay the school civil penalty within 30 days of the Court's ruling and complete defensive driving school within 60 days of the Court's ruling. I certify that I am eligible to elect to attend the defensive driving school; or
Request a court date.

STATE OF FLORIDA COUNTY OF
Sworn to (or affirmed) and subscribed before me by means of □ physical presence or □ online notarization, this day of, 20, by
(Signature of Notary Public – State of Florida)
(Print, Type, or Stamp Commissioned Name of Notary Public)
Personally Known OR Produced Identification
Type of Identification Produced
(Seal) NOTE: It is your responsibility to make sure this affidavit is in the court file before the hearing date. If Affiant/Defendant is under the age of 18, a parent or guardian must sign this affidavit:
Parent or Guardian

NOTICE

You must send the completed document via electronic mail to the CLERK OF THE CIRCUIT COURT-TRAFFIC DIVISION at traffic@desotoclerk.com.

Desoto County Clerk of Court-Traffic Division 115 East Oak Street Arcadia, FL 34266

IMPORTANT: DO NOT SEND THIS DOCUMENT TO THE JUDGE'S OFFICE.