

**IN THE COURT OF THE EIGHTH JUDICIAL CIRCUIT  
IN AND FOR LEVY COUNTY, FLORIDA**

State of Florida  
vs.

Citation Number: \_\_\_\_\_

***This form cannot be used for  
Mandatory Court Citations.***

\_\_\_\_\_  
(Defendant)

**PLEA FORM**

(NO POINTS AND NO COURT APPEARANCE REQUESTED)

*This form will be presented to the presiding Judge, along with the citation against you.*

1. I \_\_\_\_\_ (print name), the Defendant in the above case hereby:
  - Admit to the citation as charges.
  - I am giving up my right to have the case proved against me by testimony or other evidence.
  - I will not be required to appear in court for any hearings (unless the request is denied).
  - My driving record will be considered by the Court (out-of-state drivers are required to submit a current driving record with this form).
  - I am not required to make a statement: however, if I choose to make a written statement below, the Court will take it into consideration in my sentencing.
2. I request this Court sentence me to any of the following:
  - (a) Withhold of Adjudication (means no points added to my driving record)
  - (b) 4, 8, or 12- hours driving improvement course (at my own expense)
  - (c) Court cost and/or fine
3. If the Court DOES accept my request above, I understand that:
  - I will receive a written outcome of the Court.
  - I will have 60 days to complete my sentence and it is my responsibility to provide proof to:  
**Levy County Clerk of Court, Traffic Division, 355, South Court Street, Bronson, FL 32621**
4. If this Court DOES NOT accept my request for no points on my driver's license, then the Court will set my case for a hearing, and I will be required to appear. If I fail to appear for the hearing, then my driver's license may be suspended.
5. Defendant's Written Statement [OPTIONAL] (ex: attached proof of insurance, driver's license)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Defendant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/ Guardian\*

\_\_\_\_\_  
Date

\*If you are under the age of 18, a parent or guardian must also sign this statement.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

By completing this form, I am authorizing the Court and the Clerk of the Court to send copies of orders/judgments, notice or other written communications to me by email. I will ensure the software filters have been removed from my computer, so it does not interfere with my ability to receive any of the above documents.