City of Tempe Municipal Court Criminal Division Mail Stop 05-2 140 East 5<sup>th</sup> Street Suite 200 Tempe, AZ 85281 480-350-8270 480-350-2789-Fax Court-criminal@tempe.gov www.tempe.gov/court



The Court has received your recent correspondence. You stated that it would be a hardship for you to appear at your scheduled arraignment date. Attached is a Plea of Not Guilty by Mail Form. Also enclosed is a summons for an arraignment date. The completed Plea of Not Guilty by Mail Form must be received at the Court at least one day prior to the scheduled arraignment date. Upon receipt of your completed Plea of Not Guilty by Mail Form the arraignment date will be vacated.

After receiving your completed form, we will set your next court date, a Pre-Trial Conference. You must appear for this Pre-Trial Conference date. At the Pre-Trial Conference you will meet with the Prosecutor to discuss your case and possible resolution. You have the following options at the Pre-Trial Conference:

- You can accept the offer from the Prosecutor and plead "guilty" or "no contest" to the charge(s).
- You can reject the offer from the Prosecutor, but still plead "guilty" or "no contest" directly to the Court.
- You can maintain your plea of not guilty and have your case set to a trial.

Please contact the Court if you have any questions.

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WRITTEN WAIVER OF ARRAIGNMENT/REQUEST FOR PRE-TRIAL CONFERENCE

Case Number
Name
Current mailing address:
Read and initial the first three statements below. If you are charged with a DUI and are requesting a court appointed attorney read and initial next to the fourth statement and complete the enclosed financial application.
I hereby waive my right to an initial appearance/arraignment, enter a plea of not guilty and request that this matter be set for a pre-trial conference.
I know I need to appear in person for my pre-trial conference.
l understand that my failure to appear in person for a pre-trial conference may result in a warrant being issued for my arrest.
I have been charged with a violation of driving under the influence of alcohol/drugs. If convicted of this violation, the law requires mandatory jail time. I would like to apply for a Court Appointed Attorney. I have completed the enclosed financial documents. I understand that the Court will review my request and financial application and advise me if I qualify for a Court Appointed Attorney.
Signature:

IMPORTANT: This form must be completed, signed, sent to and received by the Tempe Municipal Court before the date set for your initial appearance to avoid a bench warrant being issued for you arrest.

## TEMPE MUNICIPAL COURT COUNTY OF MARICOPA, STATE OF ARIZONA TEMPE.GOV/COURT 480-350-8271

STATE OF ARIZONA, Plaintiff	Case Number:		
VS.	DEFENDANT'S FINANCIAL STATEMENT AND REQUEST FOR COURT-APPOINTED ATTORNEY		
Defendant (LIMITED JURISI			
By answering the questions below, you are telling the financial circumstances in determining whether you cost or no cost to you. You are answering these questions of court if you do not answer truthfully, or in your financial circumstances while your case is perfectly the property of t	qualify for a court-appointed attorney in this case a questions under penalty of perjury and you may r if you fail to notify the Court of any material in	at a reduced be held in	
<ol> <li>What is your marital status? Single Ma</li> <li>How many other people do you support financial living with you:</li> </ol>	lly? List age and relationship to you and o	vorced check those	
3. Do you have a job? Yes No. If yes, what and what did you do?		ou last work	
4. What is your approximate monthly take-home pa	av? \$		
5. Do you have income from the following sources   □ spousal or child support investments oth	? social security disability unemploym	ient	
<ul> <li>What is your approximate total monthly in</li> </ul>			
<ul><li>What is your spouse's approximate total if</li><li>6. Do you own a house? Yes No.</li></ul>	monthly income from all sources? \$		
<ul><li>If yes, what is the approximate value?</li></ul>	\$		
<ul> <li>Approximately how much do you owe or</li> </ul>			
7. Do you have any bank or retirement accounts?			
If yes, what is the approximate total balar			
<ul><li>8. Do you have any outstanding loans? Yes N</li><li>If yes, what type of loans:</li></ul>			
• What is the approximate balance owed?	 \$		
9. What are your total approximate monthly expens	ses? \$_		
10. How much can you afford to contribute to the co			
	Monthly attorney contribution: \$		
	Total attorney contribution: \$		
11. Any other information about your financial circ	umstances you want to share:		
I declare under penalty of perjury that I have read belief these statements are true and correct.	the above statements and to the best of my kno	wledge and	
Date	Defendant Signature		

## **CLIENT INFORMATION**

The City of Tempe has retained a private attorney to represent you in this case. To assist in this representation, please complete the following form. This is to be completed and returned to the clerk before you leave the courtroom.

## **Please Print**

Client name:			
	e you want and can receive ca		
			Apt#
City:		State:	Zip:
Cell:	Home:	E-Mail:	
Employer (if any):		School (if any): _	
Contacts (if any):			
Name:	Relationship:		Phone:
Name:	Relationship:		Phone:
Comments (non-confidence your case):	dential information you wan	t your attorney to kno	ow when they initially review