

PLEASE RETURN ALONG WITH YOUR PAYMENT TO:

BRENTWOOD MUNICIPAL DIVISION COURT
2348 SOUTH BRENTWOOD BLVD.
BRENTWOOD, MO 63144
FAX: 314-963-4729
EMAIL: muni@brentwoodmo.org
314-963-8623

PLEA OF GUILTY, APPEARANCE AND WAIVER FOR TRAFFIC CITATIONS

Citation Number: _____

I, the undersigned, do hereby enter my appearance on the offense specified above. I understand I have a right to a trial, that my signature, to this plea of guilty, will have the same force and effect as a judgment of court, and that this record will be sent to the licensing authority of this state. I do hereby plead guilty to this offense as specified, waive my right to a hearing by the court, and agree to pay the penalty prescribed for my offense

Signature: _____

Please Print:

Name: _____

Address: _____

City: _____ State _____ Zip Code: _____

Telephone number or email address: _____

Driver's License Number: _____