DEFERRED DISPOSITION-TRAFFIC

Citation Number:C	Offense:				
Name:		DL#:			
Address:	Apt#: C	ity:	State: _	ZIP:	
Mailing Address (If different):	City:	;	State:	ZIP:	
Telephone Number:	Email Addre	ss:			
• Complete and return this form to the court.					
	DEFERRAL TE	<u>RMS</u>			
• Pay court cost and applicable fees totaling \$	immediately. (Pl	ease confirm the amo	unt with the	e court.)	
-Card payments may be submitted by -In person payments accepted: Mone -Mail in payments accepted: Money of Made to the order of Judge N	y order, Cashier's check, or order or Cashier's check ONL	exact cash. Y.			
• You have 30 days from the date this form is s	igned to:				
• Commit no offenses within the 30- d	lay deferral period.				
 Obtain a copy of your driving record may obtain your driving record via may online at: www.dps.texas.gov. You may 	ail at: Texas Department of F	Public Safety, P.O. Box 1	· -		
If 25 years of age or younger, The Stat	te of Texas requires the defe	ndant to:			
• Successfully complete a six (6) hour certificate.	Texas Driving Safety Class a	nd return to the court	the "Court"	copy of the completion	
At the conclusion of the deferral period, if you ordered dismissed.	comply with the deferral te	rms and pay all court c	osts and fe	es, the complaint will be	
If you fail to comply with the Court's order, the at the hearing for the failure to comply with th according to Texas State Law. The conviction wrecord.	e Court's order, the Court w	vill issue a judgment of	conviction	and impose a fine	
		Defend	ant / Attorr	ney Signature	
Sworn and subscribed before me, the undersig	gned authority on this the _	day	, 20		
		Deputy Clerk or	Notary for	the State of Texas	

^{***}Completed Affidavit may be <u>SCANNED</u> and returned electronically via email to <u>jp5@co.liberty.tx.us</u>