

IN THE COUNTY COURT IN AND FOR HARDEE COUNTY, FLORIDA

Defendants Name: \_\_\_\_\_

Case No: 25 \_\_\_\_\_

**YOU MAY NOT USE THIS FORM IF YOUR TICKET IS SET FOR A MANDATORY HEARING. YOU MUST APPEAR AT THE SCHEDULED HEARING.**

Citation No: \_\_\_\_\_  
\_\_\_\_\_

**PLEA OF NOT GUILTY, AFFIDAVIT OF DEFENSE OR ADMISSION**

Before me personally appeared \_\_\_\_\_ (defendant), who swears and affirms as follows:

1. Name: \_\_\_\_\_

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

Phone No: \_\_\_\_\_

Email: \_\_\_\_\_

2. I am the defendant in the above-referenced case and have been charged with the following violation(s):  
\_\_\_\_\_

**\*\*\*This is not an admission that you violated any law.**

3. Check only one plea option

\_\_\_\_\_ I hereby plead NOT GUILTY and I understand that **I MUST APPEAR** before the Judge

\_\_\_\_\_ I hereby plead GUILTY and file this affidavit as an explanation of what happened for the Judge to consider before pronouncing sentence. I understand I am not required to make any further statements other than what I have written in #4, and the Judge will determine the appropriate sentence and decide whether to adjudicate (points assessed) or withhold (no points assessed). No in person hearing (unless required by the Judge) (**you must complete #4 below**).

\_\_\_\_\_ I hereby plead NO CONTEST and file this affidavit as an explanation of what happened for the Judge to consider before pronouncing sentence. I understand that I am not admitting or denying that the infraction was committed and that I may be sentenced and found guilty. I understand I am not required to make any further statements other than what I have written in #4, and the Judge will determine the appropriate sentence and decide whether to adjudicate (points assessed) or withhold (no points assessed). No in person hearing (unless required by the Judge) (**you must complete #4 below**).

4. Defendant's Statement: Please explain in your own words what happened (**additional sheet, documents, photos, etc can be attached**). **\*\*\*ONLY COMPLETE IF PLEADING GUILTY OR NO CONTEST**

\_\_\_\_\_  
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5. I understand that by pleading not guilty waives my right to attend Basic Driver Improvement and pay the statutory fine. If found guilty of the traffic violation, you may be assessed points and a fine up to \$1000. **Failure to appear in Court will result in a disposition of guilt, additional fees, points, and possible Driver's License suspension.**
  
6. I understand that any material misrepresentation could cause me to be prosecuted for a separate criminal law violation. I understand this **form must be notarized before the Court will accept.**

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

If Defendant is under the age of 18, a parent or guardian must also sign this affidavit:

\_\_\_\_\_  
Parent of Guardian

State of Florida  
County of \_\_\_\_\_

Sworn to or affirmed and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Personally known: \_\_\_\_\_

Produce Identification: \_\_\_\_\_ Type of ID produced: \_\_\_\_\_

\_\_\_\_\_  
Notary Public or Deputy Clerk

\_\_\_\_\_  
Commission # and Expiration

Return by mail or in person: Hardee Clerk of Court, 417 W. Main St., Suite 202, Wauchula, FL 33873  
Court located: 417 W. Main St., Third Floor, Wauchula, FL 33873

Email to: [hardeetraffic@hardeeclerk.com](mailto:hardeetraffic@hardeeclerk.com)

**\*\*\*\*Court Date:** \_\_\_\_\_, 20\_\_\_\_ @ \_\_\_\_\_ am/pm

A true and correct copy of this notice was hand delivered/mailed/emailed (circle one) to the above named this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Victoria L. Rogers, Clerk of the Circuit Court

By \_\_\_\_\_ D.C.

**HEARINGS ARE NOT RECORDED; YOU MAY PROVIDE YOU OWN RECORDING DEVICE  
NO INTERPRETER PROVIDED, YOU MUST PROVIDE YOUR OWN.**

**If you are a person with a disability who needs any accommodation to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the Office of the Court Administrator (863) 534-4686 at least (7) days before your scheduled hearing or immediately upon receiving this notification the hearing is less than 7 days; if you are hearing or voice impaired, call 711.**