

City of Sealy Municipal Court

P. O. Box 517, 415 Main Street

Sealy, Texas 77474

979/885-6733

979/885-4784 Fax

fmackey@ci.sealy.tx.us



Plea Form

Defendant's Name: _____

Violation: _____

Docket/Citation Number: _____

Plea of Not Guilty

I, the undersigned, do hereby enter my appearance on the complaint of the offense and cause number listed above, charge in the Sealy Municipal Court. I do hereby plead not guilty and request a trial. I waive my right to request or want any exculpatory evidence. You will be set for a pre-trial hearing on a plea of not guilty.

Defendant's Signature

Date

Phone Contact Number

Please provide a copy of your Driver License of Identification Card with the plea form.