

STATE OF WISCONSIN

CITY OF WHITEWATER  
MUNICIPAL COURT  
312 W WHITEWATER STREET  
WHITEWATER, WI 53190  
PHONE: (262) 473-1384  
FAX: (262) 473-0587

WALWORTH COUNTY

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**NOT GUILTY PLEA**

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Citation #(s): \_\_\_\_\_  
\_\_\_\_\_

The undersigned wishes to enter a plea of NOT GUILTY to the above charge(s) and request a pre-trial conference. I understand that I'm getting a notice of a pre-trial telephone hearing, which it is my responsibility to attend by telephone. If fail to attend by telephone, a default judgment convicting me of the offense(s) will be entered against me.

**PLEASE PRINT MAILING ADDRESS**  
(Include PO Box and apartment number if any)

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

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

City, State, Zip: \_\_\_\_\_

Telephone No: \_\_\_\_\_

**THE DATE OF THE PRE-TRIAL WILL BE MAILED TO YOU AFTER  
YOUR INITIAL APPEARANCE DATE**

If you move, it is your responsibility to notify the court of your new address even if you updated your address with the Department of Motor Vehicles. The court's system is not connected with the Department of Motor Vehicles.

I understand that if I mail or bring this plea form to the City of Whitewater Municipal Court before my initial appearance date, I will not have to appear at court until my pre-trial telephone conference with the city attorney.

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Signature

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Date