

IN THE COUNTY COURT,  
LEON COUNTY, FLORIDA

STATE OF FLORIDA

Case Number: \_\_\_\_\_

-VS-

Citation Number: \_\_\_\_\_

\_\_\_\_\_  
Defendant

Driver's License Number:  
\_\_\_\_\_

**AFFIDAVIT OF DEFENSE OR  
ADMISSION AND WAIVER OF APPEARANCE**

Before me personally appeared \_\_\_\_\_, who after first being placed under oath, swears or affirms as follows:

1. My name, address and telephone number are:

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

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

Telephone Number: \_\_\_\_\_

\_\_\_\_\_ **Check here if the address listed above is an update to the address listed on your citation.**

2. I am the defendant in the above referenced case(s) and am charged with the following violation(s):  
(List the charges as you understand them to be).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Check **only one** as your plea:

\_\_\_\_\_ **I hereby plead NOT GUILTY** and file this affidavit of defense as my sworn statement herein. I understand that when I plead no guilty, I do not have to supply any further statement. I understand that by my filing this affidavit, the hearing officer of judge will have to make a decision as to whether I committed the alleged violation(s), by the sworn testimony of the witnesses, other evidence, an my statement. I understand that I am waiving my personal appearance at the final hearing of this matter.

\_\_\_\_\_ **I hereby plead GUILTY** and file this affidavit as an explanation of what happened and as a statement that the hearing officer or judge can consider before pronouncing a sentence. I understand that I am not required to make any statement. I understand that the hearing officer or judge will determine the appropriate sentence and decide whether to adjudicate me guilty.

\_\_\_\_\_ **I hereby plead NO CONTEST** and file this affidavit as an explanation of what happened and as a statement that the hearing officer of judge can consider before pronouncing a sentence. By pleading no contest, I understand that I am no admitting or denying that the infraction was committed but do not contest the charges, and I understand that I may be sentenced and found guilty even though I entered a plea or no contest. I understand that I am not required to make any

statement. I understand that the hearing officer or judge will determine any appropriate sentence and decide whether to adjudicate me guilty.

4. Defendant's Statement: (additional papers, documents, photos, etc. can be attached but should be mentioned herein). Please attach additional pages if more space is needed.

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I understand that any material misrepresentation could cause me to be prosecuted for a separate criminal law violation.

\_\_\_\_\_  
Affiant/Defendant

Sworn to (or affirmed) and subscribed before me, the undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Personally known \_\_\_\_\_ Produced identification \_\_\_\_\_  
Type of ID produced \_\_\_\_\_

\_\_\_\_\_  
Notary Public, Deputy Clerk or other authority

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

Commission No: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

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

\_\_\_\_\_  
Parent or Guardian

**Note: It is your responsibility to make sure this affidavit is in the court file before the hearing date.**