



PUEBLO OF LAGUNA COURT

Phone: (505) 552-1900

Email: clerks@pol-nsn.gov

PUEBLO OF LAGUNA,

Petitioner

CASE NO: _____

VS

_____,
Respondent

ADVISE OF RIGHTS

The Respondent: _____, is hereby advised of the following rights:
(print name)

- I have the right to enter a plea of Guilty, Not Guilty, or No Contest.
- **Guilty:** I admit to violating traffic code.
- **No Contest:** I admit facts in the citation are true but I do not admit guilt.
- **Not Guilty:** the case will be set for trial.
- I have the right to an Attorney of my own choosing and at my own expense.
- I have the right to trial by the court.
- I have the right to confront witness(es) who may testify against me and to cross-examine those witness(es).
- I have the right to call my own witness(es) by subpoena.
- I have the right to appeal a finding of guilt at trial.
- I have the right to know and understand the charge(s) against me.
- The Pueblo Code designates traffic citations as civil proceedings.
- Convictions are not reported to the Motor Vehicle Department (MVD).

By my signature, I acknowledge that I have reviewed and understand these rights presented to me by the presiding Judge and or the Court Clerk.

(Respondent MUST complete all highlighted items below)

Signature: _____ **Date:** _____

Mailing Address: _____

Telephone: _____ and or **Message:** _____

Witnesses By: _____ Date: _____

(COURT CLERK)



PUEBLO OF LAGUNA COURT

Phone: (505) 552-1900

Email: clerks@pol-nsn.gov

PUEBLO OF LAGUNA,
Petitioner

CASE NO: _____

VS

_____,
Respondent

WAIVER OF TRAFFIC ARRAIGNMENT ENTRY OF PLEA

COMES NOW, the above-named Respondent, and for this Waiver of Traffic Arraignment hereby states the following:

1. That this court has jurisdiction over the parties and the subject herein,
2. That, I (**print name**) _____ wish to waive my rights to a formal arraignment to the traffic citation(s) that have been filed against me by the Pueblo of Laguna.
3. That I have read the Advisement of Rights form, that I fully understand my rights, and that I will enter my plea of:
 - _____ **Guilty** to the Citation(s): _____.
 - _____ **No Contest** to the Citation(s): _____.
 - _____ **Not Guilty** to the Citation(s): _____.

Trial date upon a Not Guilty plea: _____.

4. That I also understand that if I enter a "**Not Guilty**" plea, that I have the right to seek legal representation prior to the time of the hearing on this matter. If I enter a "**Guilty**" or "**No Contest**" plea, then I understand that I will take full responsibility for the charged citation and a penalty will be imposed by the Judge.
5. That I fully understand this **Waiver is a Waiver of the arraignment** process and that I understand that the arraignment process is an initial hearing to have rights and the citation and possible penalty explained to me followed by an entry of a plea to the citations filed against me. I have not been forced or pressured into signing this waiver and I am doing so voluntarily and of my own free will

SIGNED: _____ **DATED:** _____

MAILING ADDRESS: _____

COURT CLERK: _____ **DATED:** _____