

WAIVER OF TRIAL

Citation No. _____

Case # _____

Defendant Name: _____

Guilty

I, the undersigned do hereby enter my written waiver of a trial by Judge or Jury on the attached citation(s) and enter my plea of Guilty to said offense(s).

By pleading **Guilty**, I understand that I am waiving any right that I have to:

1. Trial by judge or jury
2. Presumption of innocence
3. Confront witnesses against me
4. The right to subpoena witnesses
5. Testify and offer evidence
6. Be assisted by counsel during trial
7. Not to incriminate myself and by pleading not guilty or remaining silent and not entering a plea, obtaining a jury trial; and
8. Arraignment

I understand the nature of the charge(s) against me. I understand that I will be fined for the offense(s) I committed according to the Bond Schedule filed in the Glynn County State Court Clerk's Office, unless otherwise informed by said Clerk's Office of the Court. I am in fact guilty. I understand that if I am not a citizen of the United States, that the entry of a plea of guilty to a State Offense may have an impact on my immigration status.

I have not been induced by any promises, force or threats to enter this plea, and I do freely and voluntarily enter my plea of **Guilty**. I am not under the influence of alcohol or drugs.

This the ____ day of _____, 20____.

Defendant Signature

Executed in the presence of:

Deputy Court Clerk or Judge