

JUSTICE OF THE PEACE, MCMULLEN COUNTY TEXAS
JUDGE DEBORA GARZA
PO BOX 238
TILDEN, TEXAS 78072 (361) 274-3372

READ THIS NOTICE CAREFULLY
COVID-19 UPDATED MAIL APPEARANCE FORM

YOU MUST CONTACT THE COURT ON OR BEFORE THE APPEARANCE DATE AND TIME AS SHOWN ON YOUR CITATION. PLEASE READ BELOW FOR INSTRUCTIONS ON HOW TO CONTACT THE COURT THROUGH EMAIL.

FOR AMOUNT DUE, OR MORE INFORMATION YOU MUST CONTACT THE COURT.

- **AT THIS TIME SEND AN EMAIL TO jpclerks@mcmullencounty.org for questions about your citation. DO NOT APPEAR IN PERSON DUE TO COVID 19 VIRUS.**
- By mail → complete the mail appearance form below and return to PO Box 238, Tilden Texas 78072
- If you are requesting a DEFFERED DISPOSITION, OR DRIVERS SAFETY COURSE, contact the court before starting either options or making a payment by emailing jpclerks@mcmullencounty.org

YOU WILL NOT BE ALLOWED TO SPEAK WITH THE JUDGE; IN ALL CASES THE JUDGE CANNOT DISCUSS ANY ASPECTS OF THE CHARGES AGAINST YOU. THE LAW FORBIDS THESE “EX PARTE COMMUNICATIONS” INCLUDING CONTACT OUTSIDE OF THE COURT.

ACCEPTABLE FORMS OF PAYMENT: CASH AND PERSONAL CHECKS ARE NOT ACCEPTED ONLY A MONEY ORDER, CASHIERS CHECK, OR CREDIT / DEBIT CARD PAYMENT WILL BE ACCEPTED BY THIS COURT. TO PAY ONLINE GO TO WWW.CERTIFIEDPAYMENTS.NET, TO PAY BY TELEPHONE, PLEASE CALL 1-866-549-1010. YOU MUST ENTER THE BUREAU CODE # 6743619 TO PROCEED WITH YOUR PAYMENT. YOUR DRIVERS LICENSE NUMBER IS YOUR ACCOUNT NUMBER. WHEN MAKING YOUR PAYMENT BE SURE TO ENTER ALL INFORMATION CORRECTLY. WE ARE NOT RESPONSIBLE FOR PAYMENTS INCORRECTLY ENTERED BY YOU. A 2.85% CONVENIENCE FEE WILL BE CHARGED TO YOU BY CERTIFIED PAYMENTS. PAYMENTS MADE ON WEEKENDS, HOLIDAYS, OR AFTER 3:30 P.M. WILL BE CREDITED TO YOUR CASE THE NEXT BUSINESS DAY.

MAIL APPEARANCE FORM

DRIVER MUST COMPLETE THIS FORM REGARDLESS OF WHO PAYS THE CITAION

INITIAL ONE:

_____ I hereby enter a plea of **NOT GUILTY**. I will be notified of a court date and will appear on that date. For correspondence purposes, I am providing the court with a correct mailing address and I will be held responsible for notifying the court with any changes of address herein.

_____ I hereby enter a plea of **GUILTY**, I waive appearance for trial; I hereby waive my right to an attorney. Total amount due is enclosed.

_____ I hereby enter a plea of **NO CONTEST**. I waive appearance for trial; I waive my right to an attorney. Total amount due is enclosed.

SIGNATURE: _____ DATE: _____

PRINT NAME: _____ D.L.# _____

MAILING ADDRESS: _____

PHONE NUMBER# _____ EMAIL: _____