

Village of Bellevue
3100 Eaton Rd
Bellevue, WI 54311
Phone: 920-884-1077 ext. 3
Fax: 920-884-1075

NOT GUILTY PLEA FORM

I, _____ plead not guilty to citation(s) # _____

My initial court appearance date is: _____

I request a pre- trial conference to discuss the above listed citation(s).

Printed Name of Defendant: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Signature: _____ Date: _____

Home Phone:() _____ Cell Phone:() _____

Social Security #: _____ - _____ - _____ or I do not have one _____

Complete this form prior to your initial court appearance date and return it to the Bellevue Municipal Court either in person, by mail, by fax or by email to pamc@villageofbellevue.org

Your plea will be entered on your initial court appearance. **You do not need to appear in court.** After your initial court appearance date, you will receive by mail a pretrial notice with a date and time for you to meet with the Village Attorney.