

30 DAY EXTENSION REQUEST FOR JUSTICE COURT

I, _____, enter a plea of

_____ GUILTY

_____ NOLO CONTENDERE

I request an extension to pay my court costs/fine(s) as set out (30 days). If my payment is late, there will be an additional \$15.00 State Mandated fee added to my total. I understand that if the court costs/fine(s) are not paid within the 30 days, I must contact the Court to explain why. (254-675-8939)

DOCKET/CITATION #	CHARGE	AMOUNT	DUE DATE
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DATE _____

DL/ID # _____

Signature _____

Mail Payments to:
Justice of the Peace
PO BOX 204
Clifton, TX 76634

Mailing Address _____

City _____, _____