

**STATE OF GEORGIA**  
**UNIFORM CITATION, ACCUSATION & SUMMONS**  
**GA**  
**NCIC NUMBER**

CITATION NUMBER

**COURT COPY**

**Page 1 of 2**

COUNTY OF		AGENCY			LATITUDE		AGENCY INCIDENT/ CASE NO	
CITY OF (IF APPLICABLE)					LONGITUDE		COURT CASE NUMBER	
DAY OF WEEK	MONTH	DAY	YEAR	TIME OF DAY				
LOCATION OF OCCURRENCE					LOCATION DESCRIPTION			

**PERSON(S)**

DEFENDANT	NAME (FIRST)	NAME (MIDDLE)	NAME (LAST)	DATE OF BIRTH & AGE	JUV	R	S	HGT	WGT	HAIR	EYES
	OTN	PLACE OF BIRTH		OLN / ID NUMBER		STATE	TYPE OF I.D.		ID EXPIRES		
	SCARS/MARKS/TATTOOS					ENDORSEMENTS					
	STREET			CITY		STATE	ZIP CODE	PROBATION / PAROLE <input type="checkbox"/> Yes <input type="checkbox"/> No			
	DATE OF ARREST		LOCATION OF ARREST								
	DEFENDANT EMAIL					DEFENDANT CELL #					

**VEHICLE(s)**

TAG / REG	STATE	EXPIRATION	VIN	YEAR	MAKE	MODEL / COLOR
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**CHARGE(S)**

IN VIOLATION OF <input type="checkbox"/> <b>GEORGIA CODE</b> CODE SECTION		CODE DESCRIPTION	VIOLATION LEVEL <input type="checkbox"/> <b>MUST APPEAR BEFORE JUDGE</b>	
IN VIOLATION OF <input type="checkbox"/> <b>COUNTY ORDINANCE</b> CODE SECTION		<input type="checkbox"/> <b>CITY ORDINANCE</b> CODE DESCRIPTION		

**NARRATIVE(S)**

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant did commit, at the place and time aforementioned, the above violation(s) of law.	
SHORT NARRATIVE DESCRIPTION	
OFFICER NAME	OFFICER'S SIGNATURE
ID NO	ORGANIZATION / UNIT

**COURT INFORMATION**

YOU ARE HEREBY ORDERED TO APPEAR BEFORE / REPORT TO THE		DEFENDANT SIGNATURE:
		_____
		COURT DATE: _____
		COURT TIME: _____
PHONE:		
To answer to the above charge. <b>Your failure to appear shall result in a warrant issued for your arrest to be brought to court to answer the charge(s) above.</b> By my signature, I authorize the court or a third party on their behalf to send text messages or phone calls to my cell phone to convey information regarding court appearances. I understand that standard text messaging rates will apply. I also understand that I may revoke this permission in writing at any time by filing a notice to "opt-out" with the clerk. THIS SUMMONS/CITATION IS ISSUED BY AUTHORITY OF THE LAWS OF THE STATE OF GEORGIA.		

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**DEFENDANT COPY**

**NOTICE TO APPEAR**

**If you do NOT sign the summons, you may be arrested and held in custody until bail is determined.**

You have been served with a citation and summons. Signing the summons is not agreement with the charge or the information contained on the front of this citation. It is an agreement to appear at the time and place shown on the summons. By signing the summons and providing your e-mail address and/or cellular phone number, you agree that the court may use these, in addition to your address, to contact you. **If you do not appear in court to answer the charge, a warrant will be issued for your arrest.**

**SPECIAL CONDITIONS**

All charges require that you DO NOT VIOLATE THE LAW WHILE YOUR CASE IS BEING RESOLVED.

If you are charged with a violation of O.C.G.A. § 16-7-21 (CRIMINAL TRESPASS); O.C.G.A. § 16-8-14 (THEFT BY SHOPLIFTING); or O.C.G.A. § 16-8-14.1 (REFUND FRAUD), the Court requires that you:

- 1) DO NOT RETURN TO THE LOCATION WHERE THE OFFENSE IS ALLEGED TO HAVE HAPPENED; &
- 2) DO NOT HAVE CONTACT WITH ANY VICTIM(S) OR WITNESS(ES) NAMED IN THE CITATION;

These conditions remain in place until the Court modifies the conditions of your release or your charges are disposed of.

If you are to be released, any additional Bond Procedures will be explained to you.

**WAIVER AND PLEA OF GUILTY FOR CHARGES NOT REQUIRING A COURT APPEARANCE**  
**[DOES NOT APPLY IF "MUST APPEAR BEFORE JUDGE" BOX ON REVERSE SIDE IS CHECKED]**

I, the undersigned, do hereby enter my written, rather than personal appearance in the court case resulting from the charge on the reverse side of this citation. I understand that by paying my fine and not personally appearing before the court I am waiving any right that I might have had to a trial by judge or jury and to be represented by counsel. I further understand that by paying the fine, I have pled guilty to the offense as charged. I further agree to mail this waiver and plea to the address shown below or to deliver it in person to the court. **This waiver will not be accepted for any charge requiring a court appearance before a judge.**

SIGNATURE OF ACCUSED \_\_\_\_\_  
SIGNATURE OF ATTORNEY \_\_\_\_\_

DATE \_\_\_\_\_  
BAR NO \_\_\_\_\_

**HOW TO CONTACT THE COURT**

*Requests to continue a case or change a court date must be in writing only, received prior to the court date, and approved by the court. You CANNOT be imprisoned solely for inability to pay a fine, but you MAY face imprisonment for failing to appear at a scheduled court date.*

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**ARRESTING OFFICER CERTIFICATE**

The undersigned being duly sworn upon his/her oath, deposes and states that s/he has just and reasonable grounds to believe, and does believe that the person named on the reverse side committed the offense therein set forth, contrary to the law.

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary / (Deputy) Clerk

\_\_\_\_\_  
Officer

\_\_\_\_\_  
Badge #

**PROSECUTING OFFICIAL CERTIFICATE**

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_

On behalf of the people of the State of Georgia, the undersigned, as prosecuting attorney for the city or county and state aforesaid, does hereby charge and accuse the person named on the reverse side of this citation with the offense named on the reserve side of this citation and that said offense was committed in the city/county and at the location named and at the time named on the reverse side of this citation. This offense was committed contrary to the laws of this state, the good order, peace and dignity thereof.

DISTRICT ATTORNEY/SOLICITOR/PROSECUTING OFFICIAL \_\_\_\_\_

**APPEARANCE, PLEA, AND WAIVER**

I, \_\_\_\_\_ have been advised that I am being charged with the offense named on the reserve side of this citation and that the minimum punishment that I can receive is \_\_\_\_\_ months imprisonment and/or a \$\_\_\_\_\_ fine; and that the maximum punishment that I can receive is \_\_\_\_\_ months imprisonment and/or a \$\_\_\_\_\_ fine. I have been advised of my rights to be represented by an attorney or that an attorney will be provided for me if I am determined to be indigent; to plead not guilty and be tried by a judge or jury; to confront the witnesses against me; and to not give incriminating evidence against myself. I hereby waive these rights; state that I have not been induced by any threat or promise to enter this plea, and do freely and voluntarily enter my plea.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

ACCUSED \_\_\_\_\_  
ATTORNEY \_\_\_\_\_

As Judge of the \_\_\_\_\_ COURT of \_\_\_\_\_, I have advised the above named accused as indicated of his/her rights, the nature of the charge against him/her, and possible consequences of the plea as entered. I am satisfied that there is a factual basis for the plea which the accused has entered and that it was entered freely and voluntarily with the nature of the charge and the consequences of the plea.

JUDGE \_\_\_\_\_

**DISPOSITION AND SENTENCE**

COURT: \_\_\_\_\_ COURT DATE: \_\_\_\_\_ CASE #: \_\_\_\_\_  
DEFENDANT PLEA: \_\_\_\_\_ GUILTY \_\_\_\_\_ NOT GUILTY \_\_\_\_\_ NOLO CONTENDERE \_\_\_\_\_ IN PERSON \_\_\_\_\_ BY MAIL  
TRIAL: \_\_\_\_\_ JURY \_\_\_\_\_ NON-JURY BENCH \_\_\_\_\_ VERDICT: \_\_\_\_\_ GUILTY \_\_\_\_\_ NOT GUILTY ATTORNEY: \_\_\_\_\_  
OTHER ACTION: \_\_\_\_\_ BOND FORFEITURE \_\_\_\_\_ NOL PROS \_\_\_\_\_ NO RECORD \_\_\_\_\_ DEAD DOCKET \_\_\_\_\_ DISMISSED  
\_\_\_\_\_ 1<sup>st</sup> OFFENDER \_\_\_\_\_ CONDITIONAL DISCHARGE  
SENTENCE: Fine / Fee \$ \_\_\_\_\_ Probation \_\_\_\_\_  
CONDITIONS/OTHER: \_\_\_\_\_  
JUDGE: \_\_\_\_\_