

**RIO HONDO MUNICIPAL COURT
121 N. ARROYO BLVD., RIO HONDO, TEXAS 78583
TELEPHONE (956)748-2102 / FAX (956) 748-**

REQUEST FOR DEFERRED DISPOSITION

TICKET NUMBER: _____

CAUSE NUMBER: _____

I, _____, defendant waive
my right to a jury trial, enter a Plea of Guilty / No Contest and request to be place on
Deferred Disposition.

Name: _____ DOB: _____

Address: _____

City, State, Zip _____ Phone: _____

Email Address _____

DEFENDANT'S SIGNATURE: _____

PLEASE CHECK ONE: _____ GUILTY _____ NO CONTEST

PROCESSED/RECEIVED BY: _____