

TENNESSEE MULTIPLE OFFENSE CITATION

THE NUMBER OF VIOLATIONS THIS CITATION: _____ MOVING + _____ NON-MOVING = _____ TOTAL (MAX. 5)

THE UNDERSIGNED BEING DULY SWORN UPON HIS/HER OATH DEPOSES:

VIOLATOR	ON _____ THE _____ DAY OF _____ 20____		TIME	A.M. P.M.	SEX	RACE	TN RES	YES NO
	NAME		D.O.B.		MONTH		DAY YEAR	
	FIRST		MIDDLE		LAST			
	ADDRESS			CITY		STATE	ZIP CODE	
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER		DL CLASS	CDL	Y N	STATE	EXPIRATION DATE
							MONTH	DAY YEAR

VEHICLE	Motorcycle	CRASH OCCURRED: Y N	MAKE	MODEL	YEAR	COLOR
	Automobile		LICENSE PLATE NO.	STATE	EXP. YEAR	
	CMV	OTHER VEH. INVOLVED? Y N	Was this vehicle registered to driver? Y N	IF NO, THEN:	NAME	BUSINESS ADDRESS
	Other		DESIGNED TO TRANSPORT 16 OR MORE PASSENGERS Y N	If CMV, Under 26,000 Lbs. Over 26,000 Lbs.	Hazmat Y N	U.S. D.O.T. NO.

LOCATION	UPON STREET/HWY	MM	CITY/COUNTY	DIRECTION	HWY	2-L	1	A R E A	BUS	1
				NORTH		3-L	2		SCHOOL	2
				EAST		4-L	3		RES.	3
				SOUTH		DIV	4		RURAL	4
				WEST		I-RD	5		CONST.	5

AFORESAID DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):										
VIOLATION	A	TCA 55-8-_____	SPEEDING _____ MPH IN _____ ZONE	CONSTRUCTION ZONE:	Y	N	RADAR PACING	02	OTHER LASER	04
				WORKERS PRESENT	Y	N		03		05
	B	TCA 55-10-205	RECKLESS DRIVING 002	H	TCA 55-8-_____	O	TCA 55-4-_____		OTHER 1	
								Y	TCA	
	C	TCA 55-8-_____	IMPROPER PASSING	I	TCA 55-8-124	P	TCA 55-8-188	113		
	D	TCA 55-50-_____	DL VIOL. _____	K	TCA 55-10-416	S	TCA 55-9-_____		OTHER 2	
									Z	TCA
E	TCA 55-9-202	MUFFLER LAW 106	L	TCA 55-9-107	T	TCA 55-12-139	110			
G	TCA 55-9-_____	SEATBELT LAW _____	M	TCA 55-9-602						

NARRATIVE:

OFFICER	THE UNDERSIGNED FURTHER STATES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE, THAT THE PERSON NAMED ABOVE COMMITTED THE OFFENSE(S) HEREIN SET FORTH, CONTRARY TO LAW.						ID#					
	THIS _____ DAY OF _____ 20____		RANK	OFFICER NAME (PRINT)				BADGE NO.				
	HAVING BEEN DULY SWORN, I DO HEREBY ATTEST THAT THE ABOVE IS A COMPLETE COPY OF THE ORIGINAL CITATION, AND THAT THE INFORMATION CONTAINED THEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.											
	SWORN AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20____		SIGNATURE OF OFFICER									JUDGE/CLERK

COURT	IN THE	1	GENERAL SESSIONS COURT OF:	_____ COUNTY	NO.	_____ CITY	NO.	
		6	JUVENILE COURT OF:	_____ COUNTY	NO.	_____ CITY	NO.	
			OTHER	_____ OF:				
ON _____ THE _____ DAY OF _____ 20____		TIME	A.M. P.M.					

NOTICE: FAILURE TO APPEAR IN COURT ON THE DATE ASSIGNED TO THIS CITATION OR AT THE APPROPRIATE POLICE STATION FOR BOOKING AND PROCESSING WILL RESULT IN YOUR ARREST FOR A SEPARATE CRIMINAL OFFENSE WHICH IS PUNISHABLE BY A JAIL SENTENCE OF ELEVEN (11) MONTHS TWENTY-NINE (29) DAYS AND /OR A FINE UP TO TWO THOUSAND FIVE HUNDRED DOLLARS (2,500).

I UNDERSTAND THE ABOVE NOTICE, AND THAT MY SIGNATURE IS NOT AN ADMISSION OF GUILT.

VIOLATOR'S SIGNATURE _____

BLER 36 (Rev. 10/11) COURT COPY RDA 291

COUNTY _____ COURT _____

CHARGE	DOCKET NO. _____ PAGE NO. _____ LINE NO. _____ HEARING DATE _____		
CODE LETTER	<input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHT TO THE AID OF COUNSEL IN EVERY STAGE OF THE PROCEEDINGS, AND FURTHER HAVING BEEN ADVISED THAT IF NECESSARY AN ATTORNEY WILL BE APPOINTED TO REPRESENT THE DEFENDANT, HEREBY WAIVE MY RIGHT TO COUNSEL. <input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHTS BY THE COURT, IN WRITING WAIVE MY RIGHTS TO BE TRIED ONLY UPON INDICTMENT OR PRESENTMENT BY A GRAND JURY AND TO TRIAL BY A JURY OF PEERS. <input type="checkbox"/> I HEREBY EXPRESSLY WAIVE IN WRITING MY RIGHT TO A PRELIMINARY HEARING.		
DEFENDANT'S PLEA:		<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY
FINED \$ _____ COURT COST \$ _____ TOTAL \$ _____		DEFENDANT SIGNATURE _____	
DISPOSITION:	<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY	<input type="checkbox"/> DISMISSED
	<input type="checkbox"/> REDUCED TO _____	<input type="checkbox"/> DISMISSED ON PAYMENT OF COST	
	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> FTA	<input type="checkbox"/> OTHER _____
		JUDGE _____	DATE _____

CHARGE	DOCKET NO. _____ PAGE NO. _____ LINE NO. _____ HEARING DATE _____		
CODE LETTER	<input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHT TO THE AID OF COUNSEL IN EVERY STAGE OF THE PROCEEDINGS, AND FURTHER HAVING BEEN ADVISED THAT IF NECESSARY AN ATTORNEY WILL BE APPOINTED TO REPRESENT THE DEFENDANT, HEREBY WAIVE MY RIGHT TO COUNSEL. <input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHTS BY THE COURT, IN WRITING WAIVE MY RIGHTS TO BE TRIED ONLY UPON INDICTMENT OR PRESENTMENT BY A GRAND JURY AND TO TRIAL BY A JURY OF PEERS. <input type="checkbox"/> I HEREBY EXPRESSLY WAIVE IN WRITING MY RIGHT TO A PRELIMINARY HEARING.		
DEFENDANT'S PLEA:		<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY
FINED \$ _____ COURT COST \$ _____ TOTAL \$ _____		DEFENDANT SIGNATURE _____	
DISPOSITION:	<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY	<input type="checkbox"/> DISMISSED
	<input type="checkbox"/> REDUCED TO _____	<input type="checkbox"/> DISMISSED ON PAYMENT OF COST	
	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> FTA	<input type="checkbox"/> OTHER _____
		JUDGE _____	DATE _____

CHARGE	DOCKET NO. _____ PAGE NO. _____ LINE NO. _____ HEARING DATE _____		
CODE LETTER	<input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHT TO THE AID OF COUNSEL IN EVERY STAGE OF THE PROCEEDINGS, AND FURTHER HAVING BEEN ADVISED THAT IF NECESSARY AN ATTORNEY WILL BE APPOINTED TO REPRESENT THE DEFENDANT, HEREBY WAIVE MY RIGHT TO COUNSEL. <input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHTS BY THE COURT, IN WRITING WAIVE MY RIGHTS TO BE TRIED ONLY UPON INDICTMENT OR PRESENTMENT BY A GRAND JURY AND TO TRIAL BY A JURY OF PEERS. <input type="checkbox"/> I HEREBY EXPRESSLY WAIVE IN WRITING MY RIGHT TO A PRELIMINARY HEARING.		
DEFENDANT'S PLEA:		<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY
FINED \$ _____ COURT COST \$ _____ TOTAL \$ _____		DEFENDANT SIGNATURE _____	
DISPOSITION:	<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY	<input type="checkbox"/> DISMISSED
	<input type="checkbox"/> REDUCED TO _____	<input type="checkbox"/> DISMISSED ON PAYMENT OF COST	
	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> FTA	<input type="checkbox"/> OTHER _____
		JUDGE _____	DATE _____

CHARGE	DOCKET NO. _____ PAGE NO. _____ LINE NO. _____ HEARING DATE _____		
CODE LETTER	<input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHT TO THE AID OF COUNSEL IN EVERY STAGE OF THE PROCEEDINGS, AND FURTHER HAVING BEEN ADVISED THAT IF NECESSARY AN ATTORNEY WILL BE APPOINTED TO REPRESENT THE DEFENDANT, HEREBY WAIVE MY RIGHT TO COUNSEL. <input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHTS BY THE COURT, IN WRITING WAIVE MY RIGHTS TO BE TRIED ONLY UPON INDICTMENT OR PRESENTMENT BY A GRAND JURY AND TO TRIAL BY A JURY OF PEERS. <input type="checkbox"/> I HEREBY EXPRESSLY WAIVE IN WRITING MY RIGHT TO A PRELIMINARY HEARING.		
DEFENDANT'S PLEA:		<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY
FINED \$ _____ COURT COST \$ _____ TOTAL \$ _____		DEFENDANT SIGNATURE _____	
DISPOSITION:	<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY	<input type="checkbox"/> DISMISSED
	<input type="checkbox"/> REDUCED TO _____	<input type="checkbox"/> DISMISSED ON PAYMENT OF COST	
	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> FTA	<input type="checkbox"/> OTHER _____
		JUDGE _____	DATE _____

CHARGE	DOCKET NO. _____ PAGE NO. _____ LINE NO. _____ HEARING DATE _____		
CODE LETTER	<input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHT TO THE AID OF COUNSEL IN EVERY STAGE OF THE PROCEEDINGS, AND FURTHER HAVING BEEN ADVISED THAT IF NECESSARY AN ATTORNEY WILL BE APPOINTED TO REPRESENT THE DEFENDANT, HEREBY WAIVE MY RIGHT TO COUNSEL. <input type="checkbox"/> AFTER BEING FULLY ADVISED OF MY RIGHTS BY THE COURT, IN WRITING WAIVE MY RIGHTS TO BE TRIED ONLY UPON INDICTMENT OR PRESENTMENT BY A GRAND JURY AND TO TRIAL BY A JURY OF PEERS. <input type="checkbox"/> I HEREBY EXPRESSLY WAIVE IN WRITING MY RIGHT TO A PRELIMINARY HEARING.		
DEFENDANT'S PLEA:		<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY
FINED \$ _____ COURT COST \$ _____ TOTAL \$ _____		DEFENDANT SIGNATURE _____	
DISPOSITION:	<input type="checkbox"/> GUILTY	<input type="checkbox"/> NOT GUILTY	<input type="checkbox"/> DISMISSED
	<input type="checkbox"/> REDUCED TO _____	<input type="checkbox"/> DISMISSED ON PAYMENT OF COST	
	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> FTA	<input type="checkbox"/> OTHER _____
		JUDGE _____	DATE _____

TOTAL FINES \$ _____	TOTAL COURT COST \$ _____
THIS _____ DAY OF _____ 20____	
JUDGE _____	

EXECUTION ISSUED _____	REISSUED _____
BOOK _____ PAGE _____	BOOK _____ PAGE _____

Defendant:

TENNESSEE MULTIPLE OFFENSE CITATION

THE NUMBER OF VIOLATIONS THIS CITATION: _____ MOVING + _____ NON-MOVING = _____ TOTAL (MAX. 5)

THE UNDERSIGNED BEING DULY SWORN UPON HIS/HER OATH DEPOSES:

VIOLATOR	ON _____ THE _____ DAY OF _____ 20____		TIME	A.M.	SEX	RACE	TN RES	YES NO
	NAME		D.O.B.					
	FIRST	MIDDLE	LAST		MONTH	DAY	YEAR	
	ADDRESS			CITY	STATE	ZIP CODE		
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER		DL CLASS	CDL	STATE	EXPIRATION DATE	
					Y		MONTH	DAY
					N		YEAR	

VEHICLE	Motorcycle	CRASH OCCURRED: Y N	MAKE	MODEL	YEAR	COLOR
	Automobile		LICENSE PLATE NO.	STATE	EXP. YEAR	
	CMV	OTHER VEH. INVOLVED? Y N	Was this vehicle registered to driver? Y N	IF NO, THEN:	NAME	BUSINESS ADDRESS
	Other		DESIGNED TO TRANSPORT 16 OR MORE PASSENGERS Y N	If CMV, Under 26,000 Lbs. Over 26,000 Lbs.	Hazmat Y N	U.S. D.O.T. NO.

LOCATION	UPON STREET/HWY	MM	CITY/COUNTY	DIRECTION	HWY	2-L	1	AREA	BUS	1
				NORTH		3-L	2		SCHOOL	2
				EAST		4-L	3		RES.	3
				SOUTH		DIV	4		RURAL	4
				WEST		I-RD	5		CONST.	5

AFORESAID DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):											
VIOLATION	A	TCA 55-8-_____	SPEEDING _____ MPH IN _____ ZONE	CONSTRUCTION ZONE:	Y	N	RADAR PACING	02	OTHER LASER	04	
				WORKERS PRESENT	Y	N		03		05	
	B	TCA 55-10-205	RECKLESS DRIVING 002	H	TCA 55-8-_____	TRAFFIC CONTROL DEVICE/SIGNAL	O	TCA 55-4-_____	REGISTRATION VIOL.	Y	OTHER 1
	C	TCA 55-8-_____	IMPROPER PASSING	I	TCA 55-8-124	FOLLOWING TOO CLOSE 006	P	TCA 55-8-188	HOV LANE VIOLATION 113		TCA
	D	TCA 55-50-_____	DL VIOL. _____	K	TCA 55-10-416	OPEN CONTAINER 199	S	TCA 55-9-_____	LIGHT LAW	Z	OTHER 2
	E	TCA 55-9-202	MUFFLER LAW 106	L	TCA 55-9-107	WINDOW TINT 199	T	TCA 55-12-139	FINANCIAL RESPONSIBILITY 110		TCA
	G	TCA 55-9-_____	SEATBELT LAW _____	M	TCA 55-9-602	CHILD RESTRAINT DEVICE 393					

NARRATIVE:

OFFICER	THE UNDERSIGNED FURTHER STATES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE, THAT THE PERSON NAMED ABOVE COMMITTED THE OFFENSE(S) HEREIN SET FORTH, CONTRARY TO LAW.						ID#					
	THIS _____ DAY OF _____ 20____		RANK	OFFICER NAME (PRINT)				BADGE NO.				
	DO NOT WRITE IN SHADED AREA											

COURT	IN THE	1	GENERAL SESSIONS COURT OF:	_____ COUNTY	NO.	_____ CITY	NO.
		6	JUVENILE COURT OF:	_____ COUNTY	NO.	_____ CITY	NO.
			OTHER _____ OF:				
ON _____ THE _____ DAY OF _____ 20____		TIME	A.M.	P.M.			

NOTICE: FAILURE TO APPEAR IN COURT ON THE DATE ASSIGNED TO THIS CITATION OR AT THE APPROPRIATE POLICE STATION FOR BOOKING AND PROCESSING WILL RESULT IN YOUR ARREST FOR A SEPARATE CRIMINAL OFFENSE WHICH IS PUNISHABLE BY A JAIL SENTENCE OF ELEVEN (11) MONTHS TWENTY-NINE (29) DAYS AND /OR A FINE UP TO TWO THOUSAND FIVE HUNDRED DOLLARS (2,500).

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THE UNDERSIGNED BEING DULY SWORN UPON HIS/HER OATH DEPOSES:

VIOLATOR	ON _____ THE _____ DAY OF _____ 20____		TIME	A.M. P.M.	SEX	RACE	TN RES	YES NO
	NAME		D.O.B.		MONTH		DAY YEAR	
	FIRST	MIDDLE	LAST		CITY		STATE	ZIP CODE
	ADDRESS		CITY		STATE	ZIP CODE		
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER		DL CLASS	CDL	Y N	STATE	EXPIRATION DATE
							MONTH	DAY YEAR

VEHICLE	Motorcycle	CRASH OCCURRED: Y N	MAKE	MODEL	YEAR	COLOR
	Automobile		LICENSE PLATE NO.	STATE	EXP. YEAR	
	CMV	OTHER VEH. INVOLVED? Y N	Was this vehicle registered to driver? Y N	IF NO, THEN:	NAME	BUSINESS ADDRESS
	Other		DESIGNED TO TRANSPORT 16 OR MORE PASSENGERS Y N	If CMV, Under 26,000 Lbs. <input type="checkbox"/> Over 26,000 Lbs. <input type="checkbox"/>	Hazmat Y N	U.S. D.O.T. NO.

LOCATION	UPON STREET/HWY	MM	CITY/COUNTY	DIRECTION	HWY	2-L	1	A R E A	BUS	1
				NORTH		3-L	2		SCHOOL	2
				EAST		4-L	3		RES.	3
				SOUTH		DIV	4		RURAL	4
				WEST		I-RD	5		CONST.	5

AFORESAID DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):											
VIOLATION	A	TCA 55-8-_____	SPEEDING _____ MPH IN _____ ZONE	CONSTRUCTION ZONE:	Y	N	RADAR PACING	02	OTHER LASER	04	
	B	TCA 55-10-205	RECKLESS DRIVING 002	H	TCA 55-8-_____	TRAFFIC CONTROL DEVICE/SIGNAL	O	TCA 55-4-_____	REGISTRATION VIOL. _____	Y	TCA
	C	TCA 55-8-_____	IMPROPER PASSING	I	TCA 55-8-124	FOLLOWING TOO CLOSE 006	P	TCA 55-8-188	HOV LANE VIOLATION 113		
	D	TCA 55-50-_____	DL VIOL. _____	K	TCA 55-10-416	OPEN CONTAINER 199	S	TCA 55-9-_____	LIGHT LAW	Z	OTHER 2 TCA
	E	TCA 55-9-202	MUFFLER LAW 106	L	TCA 55-9-107	WINDOW TINT 199	T	TCA 55-12-139	FINANCIAL RESPONSIBILITY 110		
	G	TCA 55-9-_____	SEATBELT LAW _____	M	TCA 55-9-602	CHILD RESTRAINT DEVICE 393					

NARRATIVE:

OFFICER	THE UNDERSIGNED FURTHER STATES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE, THAT THE PERSON NAMED ABOVE COMMITTED THE OFFENSE(S) HEREIN SET FORTH, CONTRARY TO LAW.								ID#				
	THIS _____ DAY OF _____ 20____		RANK	OFFICER NAME (PRINT)				BADGE NO.					
	DO NOT WRITE IN SHADED AREA												

COURT	IN THE	1	GENERAL SESSIONS COURT OF:	_____ COUNTY _____ NO. _____ CITY _____ NO. _____
		6	JUVENILE COURT OF:	_____ COUNTY _____ NO. _____ CITY _____ NO. _____
			OTHER	_____ OF: _____
ON _____ THE _____ DAY OF _____ 20____		TIME	A.M. P.M.	

NOTICE: FAILURE TO APPEAR IN COURT ON THE DATE ASSIGNED TO THIS CITATION OR AT THE APPROPRIATE POLICE STATION FOR BOOKING AND PROCESSING WILL RESULT IN YOUR ARREST FOR A SEPARATE CRIMINAL OFFENSE WHICH IS PUNISHABLE BY A JAIL SENTENCE OF ELEVEN (11) MONTHS TWENTY-NINE (29) DAYS AND /OR A FINE UP TO TWO THOUSAND FIVE HUNDRED DOLLARS (2,500).

I UNDERSTAND THE ABOVE NOTICE, AND THAT MY SIGNATURE IS NOT AN ADMISSION OF GUILT.

COUNTY _____ COURT _____ COURT ID NO. _____
HEARING DATE _____ COURT PHONE _____
COURT ADDRESS _____

CODE LETTER	DISPOSITION	GUILTY _____	NOT GUILTY _____	FTA _____	REDUCED TO _____
<input type="text"/>	FINE \$ _____	COURT COST \$ _____	TOTAL \$ _____	ARREST FEES Y__ N__	
DOCKET NO. _____		PAGE NO. _____	LINE NO. _____		

CODE LETTER	DISPOSITION	GUILTY _____	NOT GUILTY _____	FTA _____	REDUCED TO _____
<input type="text"/>	FINE \$ _____	COURT COST \$ _____	TOTAL \$ _____	ARREST FEES Y__ N__	
DOCKET NO. _____		PAGE NO. _____	LINE NO. _____		

CODE LETTER	DISPOSITION	GUILTY _____	NOT GUILTY _____	FTA _____	REDUCED TO _____
<input type="text"/>	FINE \$ _____	COURT COST \$ _____	TOTAL \$ _____	ARREST FEES Y__ N__	
DOCKET NO. _____		PAGE NO. _____	LINE NO. _____		

CODE LETTER	DISPOSITION	GUILTY _____	NOT GUILTY _____	FTA _____	REDUCED TO _____
<input type="text"/>	FINE \$ _____	COURT COST \$ _____	TOTAL \$ _____	ARREST FEES Y__ N__	
DOCKET NO. _____		PAGE NO. _____	LINE NO. _____		

CODE LETTER	DISPOSITION	GUILTY _____	NOT GUILTY _____	FTA _____	REDUCED TO _____
<input type="text"/>	FINE \$ _____	COURT COST \$ _____	TOTAL \$ _____	ARREST FEES Y__ N__	
DOCKET NO. _____		PAGE NO. _____	LINE NO. _____		

I CERTIFY THE ABOVE REPORT OF THE CASE(S) TO BE TRUE AND CORRECT.

SIGNATURE OF JUDGE/CLERK/COMMISSIONER

I CERTIFY THAT THE ORIGINAL OFFICER'S COPY OF THE TICKET HAS BEEN LOST, STOLEN, OR MISPLACED.

SIGNATURE OF DEPARTMENT OFFICIAL

TENNESSEE MULTIPLE OFFENSE CITATION

THE NUMBER OF VIOLATIONS THIS CITATION: _____ MOVING + _____ NON-MOVING = _____ TOTAL (MAX. 5)

THE UNDERSIGNED BEING DULY SWORN UPON HIS/HER OATH DEPOSES:

VIOLATOR	ON _____ THE _____ DAY OF _____ 20_____		TIME	A.M. P.M.	SEX	RACE	TN RES	YES NO
	NAME		D.O.B.		MONTH		DAY YEAR	
	FIRST	MIDDLE	LAST		CITY		STATE	ZIP CODE
	ADDRESS		CITY		STATE	ZIP CODE		
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER		DL CLASS	CDL	Y N	STATE	EXPIRATION DATE
							MONTH	DAY YEAR

VEHICLE	Motorcycle	CRASH OCCURRED: Y N	MAKE	MODEL	YEAR	COLOR
	Automobile		LICENSE PLATE NO.	STATE	EXP. YEAR	
	CMV	OTHER VEH. INVOLVED? Y N	Was this vehicle registered to driver? Y N	IF NO, THEN:	NAME	BUSINESS ADDRESS
	Other		DESIGNED TO TRANSPORT 16 OR MORE PASSENGERS Y N	If CMV, Under 26,000 Lbs. <input type="checkbox"/> Over 26,000 Lbs. <input type="checkbox"/>	Hazmat Y N	U.S. D.O.T. NO.

LOCATION	UPON STREET/HWY	MM	CITY/COUNTY	DIRECTION	HWY	2-L	1	A R E A	BUS	1
				NORTH		3-L	2		SCHOOL	2
				EAST		4-L	3		RES.	3
				SOUTH		DIV	4		RURAL	4
				WEST		I-RD	5		CONST.	5

AFORESAID DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):									
VIOLATION	A	TCA 55-8-_____	SPEEDING _____ MPH IN _____ ZONE	CONSTRUCTION ZONE: Y N	WORKERS PRESENT Y N	RADAR PACING	02	OTHER LASER	04
	B	TCA 55-10-205	RECKLESS DRIVING 002	H	TCA 55-8-_____	TRAFFIC CONTROL DEVICE/SIGNAL	O	TCA 55-4-_____	OTHER 1
	C	TCA 55-8-_____	IMPROPER PASSING	I	TCA 55-8-124	FOLLOWING TOO CLOSE 006	P	TCA 55-8-188	113
	D	TCA 55-50-_____	DL VIOL. _____	K	TCA 55-10-416	OPEN CONTAINER 199	S	TCA 55-9-_____	OTHER 2
	E	TCA 55-9-202	MUFFLER LAW 106	L	TCA 55-9-107	WINDOW TINT 199	T	TCA 55-12-139	110
	G	TCA 55-9-_____	SEATBELT LAW _____	M	TCA 55-9-602	CHILD RESTRAINT DEVICE 393			

NARRATIVE:

OFFICER	THE UNDERSIGNED FURTHER STATES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE, THAT THE PERSON NAMED ABOVE COMMITTED THE OFFENSE(S) HEREIN SET FORTH, CONTRARY TO LAW.		ID#				
	THIS _____ DAY OF _____ 20_____		RANK	OFFICER NAME (PRINT)			BADGE NO.
	DO NOT WRITE IN SHADED AREA						

COURT	IN THE	1	GENERAL SESSIONS COURT OF:	_____ COUNTY _____ NO. _____ CITY _____ NO. _____
		6	JUVENILE COURT OF:	_____ COUNTY _____ NO. _____ CITY _____ NO. _____
			OTHER	_____ OF: _____
	ON _____ THE _____ DAY OF _____ 20_____		TIME	A.M. P.M.

NOTICE: FAILURE TO APPEAR IN COURT ON THE DATE ASSIGNED TO THIS CITATION OR AT THE APPROPRIATE POLICE STATION FOR BOOKING AND PROCESSING WILL RESULT IN YOUR ARREST FOR A SEPARATE CRIMINAL OFFENSE WHICH IS PUNISHABLE BY A JAIL SENTENCE OF ELEVEN (11) MONTHS TWENTY-NINE (29) DAYS AND /OR A FINE UP TO TWO THOUSAND FIVE HUNDRED DOLLARS (2,500).

I UNDERSTAND THE ABOVE NOTICE, AND THAT MY SIGNATURE IS NOT AN ADMISSION OF GUILT.

OFFICER NOTES FOR TESTIFYING IN COURT

NARRATIVE:

Empty lines for narrative text.

COUNTY _____ COURT _____ COURT ID NO. _____
HEARING DATE _____ COURT PHONE _____
COURT ADDRESS _____

CODE LETTER [] DISPOSITION GUILTY _____ NOT GUILTY _____ FTA _____ REDUCED TO _____
FINE \$ _____ COURT COST \$ _____ TOTAL \$ _____ ARREST FEES Y__ N__
DOCKET NO. _____ PAGE NO. _____ LINE NO. _____

CODE LETTER [] DISPOSITION GUILTY _____ NOT GUILTY _____ FTA _____ REDUCED TO _____
FINE \$ _____ COURT COST \$ _____ TOTAL \$ _____ ARREST FEES Y__ N__
DOCKET NO. _____ PAGE NO. _____ LINE NO. _____

CODE LETTER [] DISPOSITION GUILTY _____ NOT GUILTY _____ FTA _____ REDUCED TO _____
FINE \$ _____ COURT COST \$ _____ TOTAL \$ _____ ARREST FEES Y__ N__
DOCKET NO. _____ PAGE NO. _____ LINE NO. _____

CODE LETTER [] DISPOSITION GUILTY _____ NOT GUILTY _____ FTA _____ REDUCED TO _____
FINE \$ _____ COURT COST \$ _____ TOTAL \$ _____ ARREST FEES Y__ N__
DOCKET NO. _____ PAGE NO. _____ LINE NO. _____

CODE LETTER [] DISPOSITION GUILTY _____ NOT GUILTY _____ FTA _____ REDUCED TO _____
FINE \$ _____ COURT COST \$ _____ TOTAL \$ _____ ARREST FEES Y__ N__
DOCKET NO. _____ PAGE NO. _____ LINE NO. _____

WAS LICENSE PICKED UP BY COURT YES__ NO__

I CERTIFY THE ABOVE CASE(S) TO BE TRUE AND CORRECT

JUDGE/ CLERK SIGNATURE _____ DATE _____

TENNESSEE MULTIPLE OFFENSE CITATION

THE NUMBER OF VIOLATIONS THIS CITATION: _____ MOVING + _____ NON-MOVING = _____ TOTAL (MAX. 5)

THE UNDERSIGNED BEING DULY SWORN UPON HIS/HER OATH DEPOSES:

ON	_____	THE	_____	DAY OF	_____	20	TIME	A.M.	SEX	RACE	TN	YES		
								P.M.			RES	NO		
VIOLATOR	NAME													
	D.O.B.													
	MONTH			DAY			YEAR							
	FIRST			MIDDLE			LAST							
ADDRESS							CITY			STATE		ZIP CODE		
SOCIAL SECURITY NUMBER				DRIVER'S LICENSE NUMBER				DL CLASS	CDL	Y	STATE	EXPIRATION DATE		
									N		MONTH DAY YEAR			

VEHICLE	Motorcycle	CRASH OCCURRED: Y N	MAKE	MODEL	YEAR	COLOR
	Automobile		LICENSE PLATE NO.	STATE	EXP. YEAR	
	CMV	OTHER VEH. INVOLVED? Y N	Was this vehicle registered to driver? Y N	IF NO, THEN:	NAME	BUSINESS ADDRESS
	Other		DESIGNED TO TRANSPORT 16 OR MORE PASSENGERS Y N	If CMV, Under 26,000 Lbs. Over 26,000 Lbs.	Hazmat	U.S. D.O.T. NO.

LOCATION	UPON STREET/HWY	MM	CITY/COUNTY	DIRECTION	HWY	2-L	1	A R E A	BUS	1
				NORTH		3-L	2		SCHOOL	2
				EAST		4-L	3		RES.	3
				SOUTH		DIV	4		RURAL	4
				WEST		I-RD	5		CONST.	5

AFORESAID DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):											
VIOLATION	A	TCA 55-8-_____	SPEEDING _____ MPH IN _____ ZONE	CONSTRUCTION ZONE:	Y	N	RADAR PACING	02	OTHER LASER	04	
	B	TCA 55-10-205	RECKLESS DRIVING 002	H	TCA 55-8-_____	TRAFFIC CONTROL DEVICE/SIGNAL	O	TCA 55-4-_____	REGISTRATION VIOL.	Y	
	C	TCA 55-8-_____	IMPROPER PASSING	I	TCA 55-8-124	FOLLOWING TOO CLOSE	006	P	TCA 55-8-188	HOV LANE VIOLATION	113
	D	TCA 55-50-_____	DL VIOL.	K	TCA 55-10-416	OPEN CONTAINER	199	S	TCA 55-9-_____	LIGHT LAW	Z
	E	TCA 55-9-202	MUFFLER LAW 106	L	TCA 55-9-107	WINDOW TINT	199	T	TCA 55-12-139	FINANCIAL RESPONSIBILITY	110
	G	TCA 55-9-_____	SEATBELT LAW	M	TCA 55-9-602	CHILD RESTRAINT DEVICE	393				

NARRATIVE:

OFFICER	THE UNDERSIGNED FURTHER STATES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE, THAT THE PERSON NAMED ABOVE COMMITTED THE OFFENSE(S) HEREIN SET FORTH, CONTRARY TO LAW.										
	ID# _____										
	THIS _____ DAY OF _____ 20 _____			RANK	OFFICER NAME (PRINT)					BADGE NO.	
DO NOT WRITE IN SHADED AREA											

COURT	IN THE	1	GENERAL SESSIONS COURT OF:	_____	COUNTY	NO.	_____	CITY	NO.	_____
		6	JUVENILE COURT OF:	_____	COUNTY	NO.	_____	CITY	NO.	_____
			OTHER	_____	OF:	_____				
ON _____ THE _____ DAY OF _____ 20 _____										
										TIME
										A.M.
										P.M.

NOTICE: FAILURE TO APPEAR IN COURT ON THE DATE ASSIGNED TO THIS CITATION OR AT THE APPROPRIATE POLICE STATION FOR BOOKING AND PROCESSING WILL RESULT IN YOUR ARREST FOR A SEPARATE CRIMINAL OFFENSE WHICH IS PUNISHABLE BY A JAIL SENTENCE OF ELEVEN (11) MONTHS TWENTY-NINE (29) DAYS AND /OR A FINE UP TO TWO THOUSAND FIVE HUNDRED DOLLARS (2,500).

I UNDERSTAND THE ABOVE NOTICE, AND THAT MY SIGNATURE IS NOT AN ADMISSION OF GUILT.

VIOLATOR'S SIGNATURE _____

BLER 36 (Rev. 10/11) RDA 291

VIOLATOR COPY

PLEASE READ CAREFULLY

YOU MUST APPEAR IN COURT. THE OFFENSE(S) FOR WHICH YOU HAVE BEEN CHARGED CANNOT BE PAID BY MAIL.

FAILURE TO APPEAR CONSTITUTES THE SEPARATE OFFENSE OF CONTEMPT OF COURT

FAILURE TO APPEAR TO ANSWER OR SATISFY THIS CITATION WILL BE THE SAME AS A CONVICTION AND WILL RESULT IN THE SUSPENSION OF YOUR DRIVERS LICENSE.

YOU MAY PAY BY MAIL. IF YOU WISH TO PLEAD GUILTY TO THE OFFENSE CHARGED AGAINST YOU, YOU MUST SIGN THE WAIVER PRINTED BELOW, AND MAIL THIS COPY OF THE CITATION AND THE PRESCRIBED AMOUNT SET BY THE COURT.

MAIL CITATION AND MONEY ORDER IN THE AMOUNT OF:

CODE LETTER _____ AMOUNT \$ _____
 CODE LETTER _____ AMOUNT \$ _____
 C/L OR OTHER _____ AMOUNT \$ _____
 C/L OR OTHER _____ AMOUNT \$ _____
 C/L OR OTHER _____ AMOUNT \$ _____

TO:

TOTAL \$ _____

COURT NAME		
ADDRESS		
CITY	STATE	ZIP CODE

NOTICE

THE COURT WILL ISSUE A WARRANT FOR THE ARREST OF ANY DEFENDANT WHO HAS FAILED TO RESPOND TO A TRAFFIC NOTICE DULY SERVED UPON HIM AND UPON WHICH AN AFFIDAVIT HAS BEEN FILED.

APPEARANCE, PLEA(S) OF GUILTY AND WAIVER

CAUSE: VIOLATION OF SECTION NO(S) _____ TCA: _____ TCA: _____
 TCA: _____ TCA: _____ TCA: _____

[STATE STATUTE(S)]. IN CONSIDERATION OF MY NOT APPEARING IN COURT, I, THE UNDERSIGNED, DO HEREBY ENTER MY APPEARANCE ON THE AFFIDAVIT FOR THE OFFENSE(S) CHARGED ON THE OTHER SIDE OF THIS NOTICE AND WAIVE THE READING OF THE AFFIDAVIT IN THE ABOVE NAMED CAUSE(S) AND THE RIGHT TO BE PRESENT AT THE TRIAL OF SAID ACTION. I HEREBY ENTER A PLEA OF GUILTY AND WAIVE THE RIGHT TO PROSECUTE, APPEAL, OR ERROR PROCEEDINGS. I UNDERSTAND THE NATURE OF THE CHARGE(S) AGAINST ME; I UNDERSTAND MY RIGHT TO HAVE COUNSEL AND I WAIVE THIS RIGHT AND THE RIGHT TO A CONTINUANCE. I WAIVE MY RIGHT TO TRIAL BEFORE A JUDGE OR JURY. I PLEAD GUILTY TO THE CHARGE(S), BEING FULLY AWARE THAT MY SIGNATURE TO THIS PLEA WILL HAVE THE SAME EFFECT AS A JUDGEMENT OF THIS COURT AND THAT A RECORD OF IT WILL BE SENT TO THE TENNESSEE DEPARTMENT OF SAFETY RECORDS SECTION.

DEFENDANT'S SIGNATURE

DEFENDANT'S ADDRESS		CITY	STATE	ZIP CODE
TOTAL FINES & COSTS	RECEIPT NO.	DATE	TITLE (CLERK, DEPUTY CLERK, DEPUTY BAILIFF)	
\$		MONTH	DAY	YEAR

SIGNATURE OF PERSON TAKING WAIVER