

**PLEA**

CITY OF LA CROSSE

vs.

\_\_\_\_\_  
Defendant Name:

Violation: \_\_\_\_\_ Citation Number(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have been cited for the above alleged violation. I understand that my citation provides me with a court date to appear in front of the Municipal Court judge.

I wish to enter one of the following pleas:

\_\_\_\_ Not Guilty (Court Appearance Required)      \_\_\_\_ Guilty      \_\_\_\_ No Contest

\_\_\_\_\_  
Defendant Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Defendant Address

\_\_\_\_\_  
Defendant Phone Number

\_\_\_\_\_  
Defendant Social Security Number

Please return your written plea by email at: [court@cityoflacrosse.org](mailto:court@cityoflacrosse.org), by fax at: (608) 789-8099  
or by mail to: Municipal Court, 400 La Crosse Street, La Crosse, WI 54601