AFFIDAVIT

(Request for extension)

| Name: | |
|--|------------------|
| Case Number: | |
| Charge: | |
| Request for extension: | (DATE REQUESTED) |
| to pay citation/due | |
| to go to court/ court date | × |
| to go to school/ certificate due _ | |
| Request made in person Request made via fax Request made via phone | |
| DEFENDANT SIGNATURE | |
| DEPUTY CLERK | |