

Position # _____

Jury _____

Bench _____

STATE COURT OF FULTON COUNTY
 CLERK'S OFFICE – CRIMINAL DIVISION
 ROOM 109
 160 PRYOR STREET, S.W.
 ATLANTA, GEORGIA 30303

WAIVER OF ARRAIGNMENT/NOTICE OF TRIAL

To: _____)	Trial Date: <u>Further Notice</u>
)	
Accusation #: _____)	Time: <u>9:00 A.M.</u>
)	
Charges: _____)	Courtroom: <u>2 E</u>
)	
_____)	Judge: <u>John R. Mather</u>

You are hereby notified to be present and ready for trial on the above stated date. If you have an attorney and any witnesses, please notify same to be present with you.

Any motions to be heard in this case must be filed in the Clerk's Office by 5:00 P.M. within 10 days of arraignment. The Motions will be heard as published.

You will receive no further notice and your failure to appear will result in a warrant being issued for your arrest.

This the _____ day of _____, 20 _____.

Deputy Clerk

The undersigned hereby waives arraignment and acknowledges receipt of Notice of Trial.

Defendant's Signature

Attorney for Defendant

Street # Street Name Apt. #

Address

City State Zip Code

City State Zip Code

Telephone Number

Telephone Number

Georgia Bar Association Number