

**IN THE SUPERIOR COURT OF ATHENS-CLARKE COUNTY  
STATE OF GEORGIA**

State of Georgia vs. \_\_\_\_\_ Case Number SU \_\_\_\_\_ CR \_\_\_\_\_

**WAIVER OF FORMAL ARRAIGNMENT AND ENTRY OF NOT GUILTY PLEA**

**Attorney for the Defendant must initial each section:**

Hereby enters an appearance as Attorney for the Defendant.

Has read and explained all charges listed in the accusation/indictment to the Defendant, waives formal arraignment on the accusation/indictment, and requests to be excused from appearing at the scheduled arraignment.

Understands that all motions must be filed within ten (10) days of the scheduled arraignment date.

Acknowledges that the District Attorney's Office maintains an "open door" and "open file" policy and that it is Counsel's responsibility to ensure the receipt of discovery.

**Defendant OR attorney on behalf of the Defendant must initial each section:**

Acknowledges that his/her attorney has read and explained the charges listed in the accusation/indictment in this case, waives formal arraignment, and requests to be excused from attending the scheduled arraignment.

Enters a **not guilty** plea to each charge in the accusation/indictment and demands a trial by jury.

Understands that it is his/her responsibility to maintain a good mailing address on record with the Clerk of Court and that if that mailing address changes, the Defendant and/or attorney must file a change of address with the Clerk of Court. The Defendant verifies that his/her current mailing address is listed below.

Understands that any unexcused failure to appear at any hearing, trial or other scheduled court date could result in a bench warrant being issued for his/her arrest.

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Signature of Defendant Date

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Defendant's Name Printed

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Attorney's Name Printed

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### Mailing Address

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### Mailing Address

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City, State, Zip Code

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City, State, Zip Code

(        ) \_\_\_\_\_  
Phone Number

(      ) \_\_\_\_\_  
Phone Number

Bar Number: \_\_\_\_\_