

INSTRUCTIONS FOR FILLING OUT FORM

1. Put your full name on line before the word, Defendant. You are the defendant. (you can leave the Case No. blank.)
2. Mark either ___ guilty or ___ no contest on **line 2**.
3. Write your explanation for the reasons you request extra time to pay all fines and court costs in **line 3**.
4. Sign and date under **line 4**.
5. Print and return to the Franklin County District Court:

- a. In person to the Franklin County Clerk of District Court office:

**Franklin County District Court Building
301 S. Main
Ottawa, Kansas 66067**

- b. By Fax: **785-242-5970**

- c. By Mail:

**Franklin County District Court
PO Box 637
Ottawa, Kansas 66067**

District Court Office Phone Number: **785-242-6000**

IN THE DISTRICT COURT OF FRANKLIN COUNTY, KANSAS

STATE OF KANSAS, Plaintiff,

Case No. _____

Vs.

_____, Defendant.

TRAFFIC PAYMENT PLAN JOURNAL ENTRY

This matter comes on for requesting **payment plan** on the ____ day of _____, 20__.

1. Defendant appears in person __ and by defendant's attorney, _____.
The State appears by _____.
2. The defendant has/is pleading: __ guilty, __no contest, to all counts of traffic citation.
3. **REQUEST FOR PAYMENT PLAN:** The Defendant requests up to a one year payment plan for the following reasons: _____

4. **Upon Approval the Defendant agrees to the payment plan, and understands their driver's license may be suspended if the Defendant becomes non-compliant with the plan.**

Defendant's Signature

DATE

Court Order: __ Court approves payment plan for _____ months, __ Court denies payment plan

__ Defendant will make monthly payments of _____ beginning the 5th day of the next month

__ Paper reviews: the Court will conduct a paper review of the file for compliance every three months

__ Dates of Paper reviews, all paper reviews are set for 8:00am.

Paper review _____ compliant __ non-compliant _____ Judges Initials

Paper review _____ compliant __ non-compliant _____ Judges Initials

Paper review _____ compliant __ non-compliant _____ Judges Initials

Paper review _____ compliant __ non-compliant _____ Judges Initials

IT IS SO ORDERED

Judges Signature

Date

On _____ the Court finds the Defendant is non-compliant with payment plan. ____30 day letter of suspension sent to Department of Motor Vehicle, ____ Department of Motor Vehicle to be notified of non-compliance of payment plan.

On _____ the Court finds the defendant has been compliant with the payment plan and the case has been paid in full.

IT IS SO ORDERED

Judges Signature

Date