

THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON  
 DRIVER'S LICENSE NO. (SCANNED) [REDACTED] STATE: WA EXPIRES [REDACTED] PHOTO ID MATCHED  YES  NO NAME: LAST [REDACTED] FIRST [REDACTED] MIDDLE [REDACTED] SFX [REDACTED] CDL  YES  NO  
 ADDRESS [REDACTED] IF NEW ADDRESS  PASSENGER CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]  
 EMPLOYER [REDACTED] EMP LOCATION [REDACTED]  
 DATE OF BIRTH [REDACTED] RACE [REDACTED] SEX [REDACTED] HEIGHT [REDACTED] WEIGHT [REDACTED] EYES [REDACTED] HAIR [REDACTED] RESIDENTIAL PHONE NO. [REDACTED] CELL/PAGER PHONE NO. [REDACTED] WORK PHONE NO. [REDACTED]  
 VIOLATION DATE ON OR ABOUT [REDACTED] INTERPRETER NEEDED  LANG: [REDACTED] AT LOCATION REF. TRAFFICWAY [REDACTED] M.P. BLOCK # 1000 CITY/COUNTY OF KELS0/COWLITZ

DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND  
 VEH LIC NO [REDACTED] STATE [REDACTED] EXPIRES [REDACTED] VEH YR [REDACTED] MAKE [REDACTED] MODEL [REDACTED] STYLE [REDACTED] COLOR [REDACTED]  
 TR #1 LIC NO [REDACTED] STATE [REDACTED] EXPIRES [REDACTED] TR YR [REDACTED] TR #2 LIC NO [REDACTED] STATE [REDACTED] EXPIRES [REDACTED] TR YR [REDACTED]  
 OWNER/COMPANY IF OTHER THAN DRIVER [REDACTED]  
 ADDRESS [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]  
 ACCIDENT NO [REDACTED] COMMERCIAL VEHICLE  YES  NO HAZMAT  YES  NO EXEMPT VEHICLE  FARM R.V.  FIRE OTHER

DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

VEH SPEED	IN A ZONE	SMD	FACE	AIRCRAFT	BAIL \$
1. VIOLATION/STATUTE CODE	46.16.010.3.L			FL RENEW EXPIRED REG <= 2 MTHS	124.00
2. VIOLATION/STATUTE CODE					BAIL \$
3. VIOLATION/STATUTE CODE					BAIL \$
4. VIOLATION/STATUTE CODE					BAIL \$
5. VIOLATION/STATUTE CODE					BAIL \$
<b>TOTAL BAIL \$ 124.00</b>					

RELATED # [REDACTED] DATE ISSUED [REDACTED]  
 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.  
 OFFICER [REDACTED] # [REDACTED]  
 OFFICER [REDACTED] # [REDACTED]

TICKET SERVED ON VIOLATOR  TICKET REFERRED TO PROSECUTOR  
 TICKET SENT TO COURT FOR MAILING  
**NOTICE OF INFRACTION**  
 This is a non-criminal offense for which you cannot go to jail.  
**YOU MUST RESPOND WITHIN FIFTEEN (15) DAYS FROM THE DATE ISSUED.**  
 Your response must be postmarked by midnight of the day it is due at the court.  
 If you do not respond or appear for court hearings:  

<b>TRAFFIC</b> It is a crime and will be treated accordingly The court will find that you committed the infraction. You will lose your driver's license privilege. Your penalty will be increased. Failure to pay may result in a referral of your case to a collection agency.	<b>NON-TRAFFIC</b> The court will find that you committed the infraction. It is a crime and will be treated accordingly. Your penalty may be increased. Failure to pay may result in a referral of your case to a collection agency.
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 Check one of the 3 boxes to the right, sign, date, and mail this form to:  
 Court contact information:  
 Phone: (360)577-3073  
 Website: www.co.cowlitz.wa.us/districtcourt  
**COWLITZ COUNTY DISTRICT COURT**  
 312 SW FIRST AVENUE  
 KELS0 WA 98626-1724

I have enclosed a check or money order, in U.S. funds, for the amount listed. I understand this will go on my driving record if "traffic" is checked. DO NOT SEND CASH. NSF checks will be treated as failure to respond.  
 Mitigation Hearing. I agree I have committed the infraction(s), but I want a hearing to explain the circumstances. Please send me a court date, and I promise to appear on that date. I know I can ask witnesses to appear but they are not required to appear. I understand this will go on my driving record if "traffic" is checked. The court may allow time payments or reduce the penalty where allowed by law.  
 Contested Hearing. I want to contest (challenge) this infraction. I did not commit the infraction. Please send me a court date, and I promise to appear on that date. The state must prove by a preponderance of the evidence that I committed the infraction. I know I can require (subpoena) witnesses, including the officer who wrote the ticket to attend the hearing. The court will tell me how to request a witness's appearance. I understand this will go on my driving record if I lose and "traffic" is checked.  
 My mailing address is: (PLEASE PRINT)  
 Name: \_\_\_\_\_ Apt: \_\_\_\_\_  
 Street or PO Box \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 City: \_\_\_\_\_ Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_  
 Is interpreter needed? Language: \_\_\_\_\_  
 X: \_\_\_\_\_ (SIGNATURE): \_\_\_\_\_

**Amount**

XYD158405 KPO11



**INFRACTION**  **TRAFFIC**  **NON-TRAFFIC**

**Citation Number**

IN THE  DISTRICT  MUNICIPAL COURT OF

STATE OF WASHINGTON, PLAINTIFF VS. NAMED DEFENDANT

COUNTY OF

CITY/TOWN OF

WASHINGTON

L.E.A. OR I.F.:

COURT ORI #:

**THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON**

DRIVER'S LICENSE NO.		STATE	EXPIRES	PHOTO I.D. MATCHED <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME: LAST	FIRST	MIDDLE	COL.	<input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS				<input type="checkbox"/> IF NEW ADDRESS <input type="checkbox"/> PASSENGER
CITY	STATE	ZIP CODE	EMPLOYER	LOCATION
DATE OF BIRTH	RACE	SEX	HEIGHT	WEIGHT
			EYES	HAPT
RESIDENTIAL PHONE NO.	CELL/PAGER NO.		WORK PHONE NO.	
VIOLETION DATE	MONTH	DAY	YEAR	TIME
ON OR ABOUT				24 HOUR
				<input type="checkbox"/> INTERPRETER NEEDED LANG. _____
AT LOCATION		MAP	CITY/COUNTY OF	

**DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND**

VEHICLE LICENSE NO.	STATE	EXPIRES	VEH. YR.	MAKE	MODEL	STYLE	COLOR
TRAILER #1 LICENSE NO.	STATE	EXPIRES	TR. YR.	TRAILER #2 LICENSE NO.	STATE	EXPIRES	TR. YR.
OWNER/COMPANY IF OTHER THAN DRIVER							
ADDRESS		CITY	STATE	ZIP CODE			
ACCIDENT	CMV	<input type="checkbox"/> YES <input type="checkbox"/> NO	16+	<input type="checkbox"/> YES <input type="checkbox"/> NO	HAZMAT	<input type="checkbox"/> YES <input type="checkbox"/> NO	EXEMPT
NO	NR	R	I	F	VEHICLE	<input type="checkbox"/> FARM <input type="checkbox"/> R.V.	<input type="checkbox"/> FIRE <input type="checkbox"/> OTHER

**DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES**

#1 VIOLATION/STATUTE CODE	VEHICLE SPEED	WA	ZONE	<input type="checkbox"/> SVD <input type="checkbox"/> PACE <input type="checkbox"/> AIRCRAFT
<b>READ THE BACK</b>				
#2 VIOLATION/STATUTE CODE				
#3 VIOLATION/STATUTE CODE				
	RELATED #	PENALTY <b>U.S. \$ Amount</b> IMPOSED		
<input type="checkbox"/> Served on Violator	I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S)			
<input type="checkbox"/> Sent to Court for Mailing	OFFICER	#		
<input type="checkbox"/> Referred to Prosecutor	OFFICER	#		

YOU MUST RESPOND TO THE COURT BELOW ACCORDING TO THE INSTRUCTIONS ON THE REVERSE SIDE OF THIS NOTICE