UNIFORM TRAFFIC TICKET					TO PLEAD BY MAIL	
WS17FFV2C3	la a a c		E AGENC			(NOT TO BE USED FOR MISDEMEANORS OR FELONIES)
To be completed by Police Officer and given to Motorist		HESTER POI	LICE DEPA	RIME	=N I	
	22- 94	22- 94550				- If you are pleading "GUILTY" by mail, place an "X" through SECTION B, then
Last Name(Defendant) GRACE		First Name M.I. JAMES L				complete and sign SECTION A If you are pleading "NOT GUILTY" by mail, place an "X" through SECTION A,
Number and Street Apt. No. Photo Lic Shown				oto Lic Shown	then complete and sign SECTION B.	
City	C4-4- 7:- 0	\	0	li ia	Class	- Mail this form to the Court noted on this ticket by Registered, Certified, or First Class Mail, with Return Receipt Requested.
City	State Zip C	ode	Owner Oper		LICENS	- DO NOT use this form for Misdemeanors or Felonies or for a third or subsequent
Client ID Number		Sex M	Date E		speeding violation in an 18 month period, instead you must appear in the Court noted	
Lic. State Date of Birth Veh. Ty	rpe Year	Make	IVI	1/1/2	Color	on this ticket in person.
0	·					- If the Court denies your plea, you will be notified by mail to appear in the Court noted on the front of this ticket.
Plate Number Reg. State OT Registration Expires						
					SECTION A - PLEA OF GUILTY	
THE PERSON DESCRIBED ABOVE IS CHARGED AS FOLLOWS						
Time Date of Offens	F			To the Court listed on the other side of this ticket:		
			AND T LAW Misd Felony MPH MPH Zone			l,
Section Sub Section 1236A		·Inf Misd F	Pelony MPH		MPH Zone	residing at have been charged with the violation as specified on the other side of this ticket. I
Description of Violation					acknowledge receipt of the warning printed in bold type on the other side of this ticket, and I waive arraignment in open court and the aid of an Attorney. I plead GUILTY to	
NO/INADEQUATE LIGHTS-BICYCLE US DOT#					the offense as charged and request that this charge be disposed of and a fine or	
			CDI	Veh	Bus Haz Ma	penalty fixed by the court.
						Additionally, I make the following statement of explanation (optional):
Discourse of Occurrence			(0 0	-
Place of Occurrence 5 LASER ST			Hwy.	NO.	Loc. Code 2801	
C/T/V Name	County	,			NCIC/ORI	
ROCHESTER, CITY OF - 2801	MONROE		Date Affirm		02701 Off Assign	All statements are made under penalty of perjury:
AFFIRMED UNDER PENALTY OF PERJ	URY		05/14/20		7 7 7	Date: Signed
7	· · ·		Arrest Type	e Ol		SECTION B - PLEA OF NOT GUILTY
(Officer's Signature) 1 - PATROL Badge/Shield 2623				The following notice applies to you if the officer did not issue you a supporting		
Officer's Last Name First Name M.I.					deposition with your ticket.	
BREEN J				NOTICE: YOU ARE ENTITLED TO RECEIVE A SUPPORTING		
					DEPOSITION FURTHER EXPLAINING THE CHARGES PROVIDED YOU REQUEST SUCH SUPPORTING DEPOSITION WITHIN THIRTY	
					(30) DAYS FROM THE DATE YOU ARE DIRECTED TO RESPOND TO	
Radar Officer's Signature					THE COURT NOTED ON THE OTHER SIDE OF THIS APPEARANCE TICKET. DO YOU REQUEST A SUPPORTING DEPOSITION?	
THIS MATTER IS SCHEDULED TO BE HANDLED ON THE APPEARANCE DATE BELOW						Yes No
						SUPPORTING DEPOSITION PROVIDED WHEN THIS TICKET WAS
ROCHESTER CITY CT. CRIMINAL PART					ISSUED? NO () SPEEDING (Gen 101) ()	
Address					GENERAL (Gen 101A)	
150 S PLYMOUTH AVE				7:		` ' ~
ROCHESTER			ate Y	Zip 146		SignatureAddress
RETURN BY MAIL BEFORE	OR IN PERSON ON	N: Date	/2022		Time 9:30 AM	nadio33
MUST APPEAR IN PERSON	ON:	3/13/	72022		3.30 AIII	
A DI EA OE GIIII TV	TO THIS CI		10			
A PLEA OF GUILTY TO THIS CHARGE IS EQUIVALENT TO A CONVICTION AFTER TRIAL. IF					City State Zip Code	
YOU ARE CONVICTED, NOT ONLY WILL YOU BE					NOTE: Mail this NOT GUILTY Plea within 48 hours. The court will notify you by First Class Mail of your appearance date.	
LIABLE TO A PENALTY, BUT IN ADDITION YOUR					7	
LICENSE TO DRIVE A MOTOR VEHICLE OR					APPLICANTS UNDER 18 YEARS OF AGE MUST SUBMIT NAME AND ADDRESS OF PARENT OR GUARDIAN BELOW.	
MOTORCYCLE, AND YOUR CERTIFICATE OF						
REGISTRATION, IF ANY, ARE SUBJECT TO					Name of Parent or Cuardian	
SUSPENSION AND	•			וםי	BED	Name of Parent or Guardian
BY LAW.	KEVUCAII	JIN AO	r neo(>KI	טבט	Address
DI LAVV.						State Zip Code
Conviction may subject you to a mandatory surcharge and/or Driver Responsibility Assessment as prescribed by law.					City —	
				FAILURE TO ANSWER THIS TICKET WILL RESULT IN THE SUSPENSION OF YOUR LICENSE AND A DEFAULT JUDGEMENT AGAINST YOU.		
Your failure to respond may result in a warrant for your arrest or suspension of your driver's					HTD (= (1/2)	
license and/or a default judgement against you.					UTD-1.7 (4/02)	

New York State - Department of Motor Vehicles

*WS17FFV2