



TYPE OR PRINT LEGIBLY IN BLACK INK. DO NOT WRITE IN SHADED AREAS.

DEFENDANT	NAME: FIRST MIDDLE LAST			RACE	SEX	DATE OF BIRTH	SOCIAL SECURITY NUMBER		
	ADDRESS (NO., STREET, APT., OR RT. AND BOX NO.)				CITY	STATE	ZIP CODE		
	DRIVER LICENSE NUMBER	CLASS	STATE	LIC. PLATE NO.	STATE	YR	VEH YR	VEH MAKE	VEH MODEL
ASSIGNED NO. HISTORY ONLY			COMMERCIAL MOTOR VEH. <input type="checkbox"/> YES <input type="checkbox"/> NO		HAZARDOUS MATERIALS <input type="checkbox"/> YES <input type="checkbox"/> NO		ACCIDENT <input type="checkbox"/> YES <input type="checkbox"/> NO		CDL <input type="checkbox"/> YES <input type="checkbox"/> NO

VIO. DATE	COUNTY	CODE	STREET/HIGHWAY	AGENCY
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VIOLATION	1	CITATION NO.	DESCRIPTION OF VIOLATION	SPEED MPH	ZONE	DUI OFFENSE <input type="checkbox"/> 1ST <input type="checkbox"/> 2ND <input type="checkbox"/> 3RD			
	WAS IGNITION INTERLOCK DEVICE ORDERED BY COURT? <input type="checkbox"/> YES <input type="checkbox"/> NO		RESTRICTION PERIOD OF DEVICE FROM: TO:		BAC SETTING OF DEVICE		OTHER COURT ORDERED RESTRICTIONS		
	HEARING DATE	COURT DOCKET NO.	CASE DISPOSITION: (CHECK ONLY THE ONE APPROPRIATE BOX)						
TRAFFIC SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE COMPLETED	<input type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> REDUCED - GUILTY OF _____ (LIST CONVICTION)		<input type="checkbox"/> DISMISSED <input type="checkbox"/> FAILED TO APPEAR - INITIATE SUSPENSION		<input type="checkbox"/> FAILED TO PAY FINES/COSTS AFTER CONVICTION - INITIATE SUSPENSION		

REMARKS

FINE	COSTS	OTHER	TOTAL ASSESSED	PAID IN FULL <input type="checkbox"/> YES <input type="checkbox"/> NO		WAIVED/INDIGENT <input type="checkbox"/> YES <input type="checkbox"/> NO		TN LICENSE SEIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	
VIO. CODE	BAT CODE	FTA CODE	FINE CODE	LIC. SURR CODE	REVOKE/SUSPEND	BEGIN	ELIGIBLE		

VIOLATION	2	CITATION NO.	DESCRIPTION OF VIOLATION	SPEED MPH	ZONE	DUI OFFENSE <input type="checkbox"/> 1ST <input type="checkbox"/> 2ND <input type="checkbox"/> 3RD			
	WAS IGNITION INTERLOCK DEVICE ORDERED BY COURT? <input type="checkbox"/> YES <input type="checkbox"/> NO		RESTRICTION PERIOD OF DEVICE FROM: TO:		BAC SETTING OF DEVICE		OTHER COURT ORDERED RESTRICTIONS		
	HEARING DATE	COURT DOCKET NO.	CASE DISPOSITION: (CHECK ONLY THE ONE APPROPRIATE BOX)						
TRAFFIC SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE COMPLETED	<input type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> REDUCED - GUILTY OF _____ (LIST CONVICTION)		<input type="checkbox"/> DISMISSED <input type="checkbox"/> FAILED TO APPEAR - INITIATE SUSPENSION		<input type="checkbox"/> FAILED TO PAY FINES/COSTS AFTER CONVICTION - INITIATE SUSPENSION		

REMARKS

FINE	COSTS	OTHER	TOTAL ASSESSED	PAID IN FULL <input type="checkbox"/> YES <input type="checkbox"/> NO		WAIVED/INDIGENT <input type="checkbox"/> YES <input type="checkbox"/> NO		TN LICENSE SEIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	
VIO. CODE	BAT CODE	FTA CODE	FINE CODE	LIC. SURR CODE	REVOKE/SUSPEND	BEGIN	ELIGIBLE		

VIOLATION	3	CITATION NO.	DESCRIPTION OF VIOLATION	SPEED MPH	ZONE	DUI OFFENSE <input type="checkbox"/> 1ST <input type="checkbox"/> 2ND <input type="checkbox"/> 3RD			
	WAS IGNITION INTERLOCK DEVICE ORDERED BY COURT? <input type="checkbox"/> YES <input type="checkbox"/> NO		RESTRICTION PERIOD OF DEVICE FROM: TO:		BAC SETTING OF DEVICE		OTHER COURT ORDERED RESTRICTIONS		
	HEARING DATE	COURT DOCKET NO.	CASE DISPOSITION: (CHECK ONLY THE ONE APPROPRIATE BOX)						
TRAFFIC SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE COMPLETED	<input type="checkbox"/> GUILTY AS CHARGED <input type="checkbox"/> REDUCED - GUILTY OF _____ (LIST CONVICTION)		<input type="checkbox"/> DISMISSED <input type="checkbox"/> FAILED TO APPEAR - INITIATE SUSPENSION		<input type="checkbox"/> FAILED TO PAY FINES/COSTS AFTER CONVICTION - INITIATE SUSPENSION		

REMARKS

FINE	COSTS	OTHER	TOTAL ASSESSED	PAID IN FULL <input type="checkbox"/> YES <input type="checkbox"/> NO		WAIVED/INDIGENT <input type="checkbox"/> YES <input type="checkbox"/> NO		TN LICENSE SEIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	
VIO. CODE	BAT CODE	FTA CODE	FINE CODE	LIC. SURR CODE	REVOKE/SUSPEND	BEGIN	ELIGIBLE		

COURT	NAME OF COURT				CORRECTED/AMENDED ABSTRACT? <input type="checkbox"/> YES, EXPLAIN CORRECTION BELOW: STAPLE COPY OF ORIGINAL DOCUMENT SUBMITTED.					
	COURT MAILING ADDRESS									
	CITY		STATE	ZIP CODE						
	COURT ID NO.		TELEPHONE NUMBER (AREA CODE)							
	THIS IS A TRUE AND CORRECT ABSTRACT.									
	JUDGE/CLERK SIGNATURE				REPORT DATE					