

IN THE CIRCUIT COURT OF ST. LOUIS COUNTY, MISSOURI

udge or Division: Aary Elizabeth Dorsey		Case Number:	
		Court ORI Number: MO095221J	
ity of Flo	rissant		-
		VS.	(Date File Stamp)
efendant'	s Name/Address:		
		Waiver of Counsel	
I, ı	request that the Court allow my	waiver of attorney with full understanding that I am entitled to an	attorney if I so desire, and with
full kno		e following additional considerations:	
1.	That the offense charged is		with the
	punishment range of _\$1 - \$1	000 AND/OR 1-90 DAYS	
2.	That I have the right to be represented by an attorney and that, if indigent, and unable to employ an attorney, I have the right to		
	request the judge to appoint an attorney to assist me in defending against the charge, and that the Court will appoint an attorney to		
	assist me if it finds that I am	ndigent and not able to employ one.	
3.	That I have a right to a trial or trial by jury with the assistance of an attorney to confront and cross-examine witnesses; that a guilty		
	plea waives any right to a tria	1.	
4.	That I have the right to remain silent and not make any statement which may be used in the prosecution of the charges filed against me.		
5.	I am aware that any recommendation by the prosecutor is not binding on the judge who may accept or reject such recommendation.		
6. That if a guilty plea is entered or if found guilty by trial of the charge, the judge could impose a sentence inclu		a sentence including a fine and/or	
	probation up to a sentence of	confinement, depending on the range of punishment referenced al	bove.
7. That I have the right to appeal the Court's judgment (decision) or the jury's verdict should I exercise my right to		ercise my right to trial and be found	
	guilty.		
8.	I understand that by representing myself, I cannot claim inadequate representation at a later date.		
9.	I now have been advised of, and understand, that my plea of guilty will result in my giving up all of the above rights, and that I		
freely and voluntarily give up those rights,		those rights, and I plead guilty to the above charge(s). I voluntar	rily and without the result of force or
	threats or promises, waive my	right to counsel.	
Th	e above rights have been read to	me by the judge in open court, and I understand these rights and	I request the court to accept my
request	of waiver of attorney.		
	Date	Defendant's Signati	ure
On	this date, the defendant persona	ally appeared before me and was read the above information by m	e and stated these rights were
understo	ood and the defendant signed thi	s request in my presence.	
The	erefore, the Court accepts the de	efendant.	
	Date	Judge's Signature	