

NORTH CAROLINA

IN THE GENERAL COURT OF JUSTICE  
DISTRICT COURT DIVISION

\_\_\_\_\_ COUNTY

FILE NUMBER: \_\_\_\_\_

STATE OF NORTH CAROLINA,

§  
§  
§  
§  
§  
§  
§

vs.

**WAIVER OF APPEARANCE**

\_\_\_\_\_  
**Defendant.**  
\_\_\_\_\_

I hereby acknowledge that I am the Defendant charged in the criminal proceeding in which this waiver is presented. I understand that I have a constitutional right to appear in court and to answer the charges against me. I understand that I am presumed by law to be innocent until proven guilty beyond a reasonable doubt. I understand that I have a right to confront the witnesses against me and to face and cross examine my accuser. I understand that I have a right to trial by jury. I hereby waive my right to appear in open court and hereby name, appoint and designate Arthur M. Blue, to appear on my behalf and to enter on my behalf a plea of not guilty, guilty as charged or guilty to a lesser included offense and hereby agree, subject to any right of appeal, to be bound by the judgment of the court.

\_\_\_\_\_  
**Defendant's Signature**

\*\*\*\*\* DRIVER LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ \*\*\*\*\*

**Fee Agreement**

The above Defendant and Arthur M. Blue Law Office, P.A., agree that the firm has been employed by the Defendant to defend the above defendant only on the above charges only in the District Court of \_\_\_\_\_ County, North Carolina, on the matter of \_\_\_\_\_ or file number \_\_\_\_\_. That the Client has agreed to pay the attorney fee in the sum of \$ \_\_\_\_\_. Defendant is responsible for all cost and fines.

(The Client understands that any payment made by debit or credit card will result in a \$5.00 service fee.)

**METHOD OF PAYMENT**

CHECK OR MONEY ORDER  CREDIT/DEBIT CARD

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Billing Zip Code \_\_\_\_\_ Amount Paid \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Signature: \_\_\_\_\_



PLEASE SELECT THE OPTION TO RECEIVE YOUR DISPOSITION LETTER: U.S. MAIL  EMAIL

RETURN BY U.S. MAIL, EMAIL OR FAX  
WITH COPY OF CITATION TO:  
ARTHUR M. BLUE LAW OFFICE, P.A.  
P.O. Box 1540  
Carthage, NC 28327  
Fax: (910) 947-5510  
Email: trafficket@artbluelaw.com