



**WINOCOUR LAW**  
ATTORNEYS & COUNSELORS  
A PROFESSIONAL CORPORATION  
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**TRAFFIC CITATION INTAKE**

**If you have any difficulty utilizing this form, please visit our web-based solution at [onlineticketlawyer.com/hire-us](http://onlineticketlawyer.com/hire-us)**

**Name:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
*(Nombre)*

**Mailing Address:** \_\_\_\_\_  
*(Direccion Postal)*

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
*(Ciudad) (Estado) (Codigo Postal)*

**Telephone: (a)** \_\_\_\_\_ **(b)** \_\_\_\_\_  
*(Telefono)*

**Date of Birth:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **DL#:** \_\_\_\_\_ **CDL:** \_\_\_\_\_ **State:** \_\_\_\_\_ **U.S. Citizen:** \_\_\_\_\_  
*(Fecha de Nacimiento) (Sexo) (Licencia de Conducir) (Estado)*

**Employer:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
*(Nombre de su Empleado) (Direccion del Empleado) (Telefono del Empleado)*

**Reference:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
*(Contacto Personal) (Telefono)*

**Have you taken a Texas Defensive Driving course or Texas Drivers Safety Course in the last 12 months?:** \_\_\_\_\_

**Is there anything else you think we should know about your citation(s)? Please be brief; as Einstein said: "If you can't explain it simply, you don't understand it well enough."**

**TRAFFIC CITATION AGREEMENT – ATTORNEY/CLIENT CONTRACT**

Issuing Authority (City or County)	Violation/Offense	Date	Citation Number

**CLIENT UNDERSTANDS AND AGREES THAT NO PROMISES OR GUARANTEES HAVE BEEN MADE AS TO THE OUTCOME OF THE ABOVE CASE(S)**

- 1) I, \_\_\_\_\_, hereinafter known as CLIENT, do hereby employ Winocour Law, hereinafter known as ATTORNEY, to represent me for the Class "C" citations designated above.
- 2) In consideration of such representation, I agree to pay to ATTORNEY a non-refundable agreed upon fee per violation plus any additional fees which may arise during representation. I understand and agree that the above fee DOES NOT include a trial.
- 3) Client understands that this contract is limited to the offenses listed above.

**PLEASE READ AND INITIAL EACH OF THE FOLLOWING IF YOU UNDERSTAND AND AGREE:**

\_\_\_\_\_ Client understands that it can take up to seven (7) business days for a warrant to be lifted depending on the court in which the warrant is located.

\_\_\_\_\_ Client consents to the association of counsel.

\_\_\_\_\_ Client authorizes ATTORNEY, or Associated Counsel, to sign my name to any documents necessary in my representation. I authorize ATTORNEY, or Associated Counsel, to enter a plea for my case(s) if I am not present in court.

\_\_\_\_\_ Client agrees to pay any fines, court costs, and expenses which may be assessed or charged in the above case(s). I understand that if any fines or court costs assessed in the above case(s) are not paid by me, a warrant will be issued for my arrest.

\_\_\_\_\_ If Client violates any of the contractual terms, or pursues unlawful activity, ATTORNEY may withdraw.

\_\_\_\_\_ Client agrees to provide ATTORNEY the original or a readable copy of each citation/ticket for the identified charges.

\_\_\_\_\_ I understand the following: A conviction or Deferred Disposition may have immigration consequences. **NOTE: A plea of "guilty" or "no contest" may result in deportation. Immigration Law is a specialized field of law, and ATTORNEY is not an Immigration Lawyer. I should consult an Immigration Lawyer if I want advice on this subject.**

\_\_\_\_\_ **I waive my right to a trial** and request ATTORNEY to obtain the best plea bargain agreement he can obtain on my above case(s). I agree to pay the fee(s), or charge(s), assessed within the time allowed. **I understand I must be present in court or risk convictions on my record. I UNDERSTAND IF I WANT A TRIAL ATTORNEY'S FEE IS \$1500.00**

\_\_\_\_\_ I agree to deliver to ATTORNEY any proof (e.g. current insurance and insurance at the time of offense, inspection, registration) or other evidence, to aid in the management of my case, within 24 hours of signing this contract. Failure to comply may result in a plea bargain agreement, wherein I may be found guilty or granted deferred disposition, and a fine assessed.

\_\_\_\_\_ I agree to be notified by EMAIL/FAX/TELEPHONE for all court settings and court results given to ATTORNEY.

\_\_\_\_\_ I have never entered a guilty plea or a no contest plea (nolo contendere) nor have I made any other arrangements with the court for any of the citation(s) which I hereby employ ATTORNEY to handle.

\_\_\_\_\_ I agree to pay any deferral fees, court costs, and other fines including taking defensive driving if ordered by the court. If defensive driving is required, I am responsible for scheduling classes and following up with the orders of the court.

\_\_\_\_\_ I promise to inform ATTORNEY of any change in my address or phone numbers. I understand my failure to do this may cause me to lose a procedural right or even my entire case, which might result in a warrant being issued for my arrest. **Changes of address or phone number must be submitted in writing to ATTORNEYS offices.**

\_\_\_\_\_ I agree to contact ATTORNEY if I receive anything from the court or a collection agency related to the case(s). I also agree to provide the item or document to ATTORNEY within twenty-four (24) hours of receipt.

\_\_\_\_\_ I understand that my case(s) may not get dismissed; I understand all deferred adjudication/probations require payment of additional fees to the court.

\_\_\_\_\_ I understand no part of the fee is refundable for any reason.

\_\_\_\_\_ I understand and authorize any check submitted as payment to be processed as an electronic check through the telecheck system. If returned for any reason, there will be an additional fee.

\_\_\_\_\_ **I agree to appear at the specified time, place and date of each court date.** I understand that any of the following may result from a missed court date:

- (1) A warrant for my arrest may be issued and executed.
- (2) I may have to pay the ticket. or
- (3) The case may be re-set. (ADDITIONAL ATTORNEY'S FEES WILL APPLY)

**If I miss a court date I authorize ATTORNEY to enter a no contest plea (nolo contendere) to prevent a warrant from being issued immediately for my arrest, or to dispose of the case in any manner Attorney determines best.**

\_\_\_\_\_ **I understand ATTORNEY can only guarantee his efforts and cannot guarantee the outcome of any particular case.**

\_\_\_\_\_ I AGREE IN THE EVENT MY TICKETS ARE IN **CAPIAS WARRANT STATUS**, ATTORNEY SHALL RETAIN **75% OF FEE** AS AN INVESTIGATION FEE, AND NOTIFY ME THE AMOUNTS DUE.

**NOTICE: IF SOMEONE HAS SIGNED THIS CONTRACT FOR YOU, YOU HAVE THIRTY (30) DAYS TO NOTIFY THE ATTORNEY IF YOU OBJECT TO ANY PORTION OF THIS CONTRACT.**

*“I hereby designate ATTORNEY, and Associated Counsel, listed in this contract as my true and lawful attorney, in fact as well as in law, and authorize him to sign my name to any appearance bond, or other legal document and to acknowledge same before a Notary Public, as fully as if I signed myself. Additionally, I further authorize the attorney, or their representative, to appear in court on my behalf in the case(s) wherein I am charged, or may be charged, as a result of my arrest, and to enter a plea of either “guilty”, “no contest”, or “not guilty” on my behalf, as ATTORNEY may see fit to file on my behalf. I further give ATTORNEY express authority to waive my appearance at any proceeding with reference to the case(s) and to appear on my behalf. I further waive any right to a jury trial and will give ATTORNEY express authority to enter a plea on my behalf, even if that plea negatively affects my license, liberty or pecuniary interests.”*

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Client Signature

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Date

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Winocour Law

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Date