



# Central Municipal Court

Chief Municipal Judge  
R. Murray Hughes

1067 West Main Street

Assistant Judge  
Tina M. Galbreath

Post Office Box 549

Central, South Carolina 29630

Ministerial Recorder  
Jessica Parham

Phone (864) 639-6381 Fax (864) 639-2610

## Jury Trial Request

I, \_\_\_\_\_ hereby request a jury trial for the following charge(s):

Ticket/Warrant #	Offense

Defendant's Mailing Address and Phone Number:

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

\_\_\_\_\_ City

\_\_\_\_\_ State

\_\_\_\_\_ Zip

\_\_\_\_\_ Telephone Number(s)

Please initial the following:

\_\_\_\_\_ I understand that it is my responsibility to notify the Court, ***in writing***, of any change of address.

\_\_\_\_\_ I understand that the Court will send one certified notice by mail to the address that I have provided to the Court and that it is my responsibility to accept such notice.

\_\_\_\_\_ I understand that the Court on said notice will provide me with jury selection date and time. Should I fail to attend or contact the Court prior to the date and time provided by the Court, I will waive my right to a jury trial, and I consent to the Court conducting a Bench Trial in the absence.

\_\_\_\_\_ Court Official

\_\_\_\_\_ Date

\_\_\_\_\_ Defendant

\_\_\_\_\_ Date