

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

STATE OF GEORGIA

vs.

] ] ]

Case No.: \_\_\_\_\_

\_\_\_\_\_  
Defendant

**WAIVER OF ARRAIGNMENT**

After being advised by my attorney of all legal rights regarding arraignment including my right to be present and understanding those rights, the defendant waives any and all arraignment and pleads “*Not Guilty*” on all counts in the indictment or accusation herein. Counsel by signature below certifies this waiver is free and voluntary, and the defendant is, in the opinion of counsel, at this time legally competent to execute this waiver and no issue of competence, mental illness, mental retardation or insanity is being raised.

The defendant also acknowledges that he/she knows and understands when all non jury dates have been set by the court in this matter including but not limited to calendar calls; plea / disposition days/ and pretrial hearing days. Counsel further certifies that he/she has informed the defendant of these non jury dates.

Counsel also certifies that all pre trial motions have either already been filed or will be filed within ten (10) days of the arraignment date.

**IMPORTANT NOTICE:** THE SIGNATURE OF BOTH DEFENDANT AND COUNSEL IS REQUIRED BELOW BEFORE THIS WAIVER MAY BE FILED. THIS WAIVER **MUST** BE EITHER HAND DELIVERED OR MAILED AND RECEIVED BY THE CLERK OF COURT AT LEAST 2 DAYS PRIOR TO THE CALL OF THE ARRAIGNMENT CALENDAR WITH A COPY TO THE LOCAL OFFICE OF THE DISTRICT ATTORNEY. THIS WAIVER CANNOT BE COMMUNICATED BY FAX OR BY TELEPHONE. IF THE WAIVER IS NOT RECEIVED BY HAND DELIVERY OR BY MAIL 2 DAYS PRIOR TO THE CALL OF THE ARRAIGNMENT CALENDAR, THE DEFENDANT MUST APPEAR. A FAILURE TO APPEAR **WILL** RESULT IN A FORFEITURE OF THE DEFENDANT’S BOND AND A BENCH WARRANT FOR THE ARREST OF THE DEFENDANT. THERE WILL BE NO EXCEPTIONS TO THIS RULE.

This \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Defendant’s Signature

\_\_\_\_\_  
Defendant’s Attorney’s Signature/Bar Number

\_\_\_\_\_  
Defendant’s Attorney’s Address

\_\_\_\_\_  
Defendant’s Attorney’s Phone Number