



MUNICIPAL COURT
130 S. CHESTNUT STREET
MCKINNEY, TEXAS 75069
972-547-7676

Request for Initial Appearance Extended

(Eligible for cases 21-28 days after date of citation)

Date: _____

Defendant Name: _____

Case Number(s): _____

Appearance Date: _____

The initial appearance date for the defendant named above and referenced case number(s) has been extended until _____ **(next available docket)**, which is the next available open docket. You must appear a minimum of thirty minutes (30) before the scheduled docket with the court clerk; under no circumstances will you be permitted to check in after your scheduled appearance time.

There will be no further appearance extensions.

Failure to appear by the specified date may result in a warrant being issued for your arrest and a charge of Failure to Appear (see Texas Penal Code § 38.10(a)) which is punishable by a fine of up to \$500.00 plus court costs, being filed against you.

Court proceedings are serious matters deserving of the highest standards of dignity and decorum. **Please dress appropriately; no shorts, hats, halter tops or tank tops. Cellular phones and pagers must be on silent while in the courtroom.**

Defendant Signature

Clerk's Initials

Street City State Zip

Phone



McKinney Municipal Court

Customer Information Sheet

In order for us to serve you better, please fill out the information listed below.

Name (First, Middle, Last)				Date of Birth	
Home Address					
Apt #		City		State	
Mailing Address (if different from home)					
Apt#		City		State	
E-mail Address					
Home Phone			Cell Phone		
Employer Name				City	
Work Phone #					
I may also be contacted through:					
<input type="checkbox"/> Facebook		<input type="checkbox"/> Snapchat			
<input type="checkbox"/> LinkedIn		<input type="checkbox"/> Instagram			
<input type="checkbox"/> Twitter		<input type="checkbox"/> Other: _____			

Informacion de Cliente

Para un mejor servicio, complete la informacion:

Nombre Completo				Fecha de Nacimiento	
Dirección de su Residencia					
Apt #		Ciudad		Estado	
Dirección Donde Recibe Correspondencia (incluya solo si es diferente a la de su domicilio)					
Correo Electrónico			Número Telefónico - Casa		Número Telefónico - Cell
Empleador Nombre				Ciudad	
Número Telefónico trabajo					
Tambien me pueden contactar:					
<input type="checkbox"/> Facebook		<input type="checkbox"/> Snapchat		<input type="checkbox"/> LinkedIn	
<input type="checkbox"/> Instagram		<input type="checkbox"/> Twitter		<input type="checkbox"/> Other: _____	