

To be inserted by Court

Case Number:

Date Filed:

FDN:

**WRITTEN GUILTY PLEA TO SUMMARY OFFENCE**  
Criminal Procedure Act 1921 s 57A

[MAGISTRATES/YOUTH/ENVIRONMENT RESOURCES AND DEVELOPMENT] Select one COURT OF SOUTH AUSTRALIA  
CRIMINAL JURISDICTION

[FULL NAME]  
Informant

v

[FULL NAME]  
Defendant/Youth

<b>Lodging party</b>		
	<small>Party title</small>	<small>Full Name of party</small>
Name of law firm/office		
<small>If applicable</small>	<small>Law firm/office</small>	<small>Name of responsible solicitor</small>
Name of authorised officer		
<small>If body corporate and no law firm/office</small>	<small>Full Name</small>	

**Guilty Plea**

I plead guilty to

- the charge on the Information dated [date].
- all charges on the Information dated [date].
- count[s] [number/s] provision for multiple counts on the Information dated [date] and believe that the prosecution is prepared to withdraw the balance of counts on my plea of guilty to these counts.

The charge[s] to which I am pleading guilty [is/are] Delete inapplicable [a summary offence/summary offences] Delete Inapplicable not punishable by imprisonment or detention.

I wish to say the following in relation to my plea of guilty:

Set out any facts you want the Court to consider in numbered paragraphs

1.

.....  
Signature of [Defendant/Youth]

.....  
Full name of [Defendant/Youth]

before me .....

Signature of attesting witness  
witness must be a Justice of the Peace, Solicitor or Police Officer

.....  
Printed name and title of witness stamp here if applicable

Next box displayed if filed by a solicitor

**Certification by legal practitioner** mandatory if Defendant/Youth represented

I, [name of individual solicitor/barrister] certify that:

1. I am a lawyer holding a current practising certificate under the *Legal Practitioners Act 1981*;
2. I am representing the [name of Defendant/Youth] in these proceedings.
3. The [name of Defendant/Youth] received legal advice in respect of this plea prior to signing this form.

.....  
Signature of legal practitioner

.....  
Full name of legal Practitioner

.....  
Date

**Guilty Plea**

I, *[name of individual barrister/solicitor]* certify that:

1. I am a lawyer holding a current practising certificate under the *Legal Practitioners Act 1981*.
2. I am acting for the Defendant in this proceeding.
3. I have the authority of the Defendant to plead guilty on their behalf to
  - the charge on the Information dated *[date]*.
  - all charges on the Information dated *[date]*.
  - count[s] *[number/s]* provision for multiple counts on the Information dated *[date]* and believe that the prosecution is prepared to withdraw the balance of counts on my plea of guilty to these counts.
4. The *[name of Defendant/Youth]* received legal advice in respect of this plea prior to this form being signed.

The charge[s] to which I am pleading guilty on behalf of the Defendant *[is/are]* Delete inapplicable *[a summary offence/summary offences]* Delete Inapplicable not punishable by imprisonment or detention.

I wish to say the following in relation to the Defendant's plea of guilty:

Set out any facts you want the Court to consider in numbered paragraphs

1.

.....  
Signature of *[name of individual barrister/solicitor]*

.....  
Full name of *[name of individual barrister/solicitor]*

before me .....

Signature of attesting witness  
witness must be a Justice of the Peace, Solicitor or Police Officer

.....  
Printed name and title of witness stamp here if applicable

**Service**

The party filing this document is required to serve it on all other parties in line with the Rules of Court.