

GLADSTONE MUNICIPAL COURT

CITY OF GLADSTONE )
Plaintiff, )
vs. )
Defendant )

FINE PAYMENT AGREEMENT

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

The COURT ORDERED amount due \$ \_\_\_\_\_.

I agree to the following payment agreement:

Payment of \$ \_\_\_\_\_ due \_\_\_\_\_ and

[ ] \$ \_\_\_\_\_ on the \_\_\_\_\_ day of each month following until paid in full.

[ ] Pay in full by \_\_\_\_\_.

[ ] \$ \_\_\_\_\_ by \_\_\_\_\_. I am aware that if the fee is not paid in full by the agreed upon date. I will be convicted of the violation and the fine will increase to the amount on the original citation.

I further understand failure to make the above payments as agreed shall result in collection action until such payment is received in full. "I am providing my social security number to be used to verify my identification and for collection purposes only. If I refuse to provide this information, I understand payment is due in full on date of sentencing." Fines not paid as set forth above shall bear interest at the current rate per annum. Per ORS 1.202 if the fine/fees are not paid in full within 30 days of the conviction, the court will add a 25% cost of collections to all monetary obligations, not less than \$50 and not to exceed \$200.00.

Defendant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

City State Zip

Cell Phone: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Social Security No: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Employer : \_\_\_\_\_

Fines remaining unpaid will be sent to collections and interest will be added.

Court Contact/Mail payments to: Gladstone Municipal Court
18505 Portland Ave
Gladstone, OR 97027
(503) 656-5224 ext. 3
municourt@gladstoneoregon.us

Online payments: www.ci.gladstone.or.us

Phone payments: 1-800-701-8560