



## NOTICE TO DEFENDANT

### HOW TO OBTAIN A COPY OF PROSECUTION EVIDENCE (DISCLOSURE)?

You may request a copy of the documents in the Prosecution file (disclosure) by completing the Request for Disclosure Form (see reverse), and delivering the completed and signed form in person, by mail, or by fax to:

In Person/Mail:

**Town of Cobourg**

**Legislative Service Department**

**ATTN: Town of Cobourg Municipal Prosecutor**

**55 King Street West**

**Cobourg, Ontario K9A 2M2**

**Fax: 905-372-7558**

You can choose to have disclosure emailed to you, or faxed to you, or you may pick it up in person.

NOTICE TO DEFENDANT

## REQUEST FOR DISCLOSURE

Defendant Information:
------------------------

Name of Defendant: \_\_\_\_\_

Defendant's Date of Birth: \_\_\_\_\_

Month

Date

Year

Defendant's Address: \_\_\_\_\_

Requested by: \_\_\_\_\_

Last Name

First Name

Defendant

Lawyer

Paralegal

Agent

Phone Number of Requestor: (\_\_\_\_) \_\_\_\_\_

Charge Information:
---------------------

File Number: \_\_\_\_\_  CPS  By-law Enforcement

Charge: \_\_\_\_\_

Offence Date: \_\_\_\_\_ Court Date: \_\_\_\_\_

How do you wish to receive disclosure? (Choose one)
---

Email my disclosure to this email address: \_\_\_\_\_ or;

Mail my disclosure to \_\_\_\_\_ or;

Fax my disclosure to this fax number (\_\_\_\_) \_\_\_\_\_ or;

I will pick up disclosure at 55 King Street West, (Victoria Hall) Cobourg, Ontario K9A 2M2

\*The Town of Cobourg cannot guarantee the confidentiality of the disclosure if it is requested to be sent by fax or email.

Signature of Requestor: \_\_\_\_\_ Date of Signature: \_\_\_\_\_

Office Use Only
-----------------

Date Received: \_\_\_\_\_ Date Disclosure Prepared \_\_\_\_\_

Personal Information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M56, as amended. Inquires about the collection of personal information should be directed to the Municipal Clerk.