

REQUEST FOR DISCLOSURE- HTA

Demande de Divulgation-HTA

Requests for disclosure can be emailed to : prosecutor@sdgcounties.ca or faxed to 613 932-6195

Name of Defendant: _____

Nom de l'accusé

Offence No.: _____

No. de l'infraction

Offence: _____

L'infraction

Charging Agency: _____

L'agente de police

Next Court Date: _____

La prochaine date de comparution

Requested by: _____

Demandé par

*****Pick up of disclosure is not an option any longer.**

DISCLOSURE WILL BE PROVIDED by FAX AND EMAIL ONLY (or MAIL IF YOU DO NOT HAVE FAX OR EMAIL but provide your address on this form)

Phone #: (MUST PROVIDE) _____

Fax # : _____

Email : _____