

PLEA OF GUILTY FORM

The Chief Executive Officer
Townsville City Council
PO Box 1268
TOWNSVILLE QLD 4810

Date: _____

I, _____ HAVE RECEIVED A
SUMMONS TO ATTEND AT THE MAGISTRATES COURT AT TOWNSVILLE ON THE
_____ DAY OF _____, 20____, ON A CHARGE OF
_____ COMMITTED AT
_____ ON THE _____ DAY
OF _____, 20____.

I PLEAD GUILTY TO THE CHARGE LAID DOWN IN THE SUMMONS AND REQUEST
THAT IT BE DEALT WITH IN MY ABSENCE AS I WILL BE UNABLE TO ATTEND THE
COURT ON THE DAY MENTIONED.

I DESIRE THAT THE FOLLOWING SUBMISSION BE BROUGHT TO THE ATTENTION
OF THE JUSTICES WITH A VIEW TO MITIGATION OF PENALTY.

(SIGNATURE)

(WITNESS)