ONTARIO COURT OF JUSTICE – CITY OF KENORA PROVINCIAL OFFENCES COURT Additional Information in Support of Motion for Extension of Time to Pay Fine

NAME	Di								ATE OF BI	RTH			
CASE NUMBER(S)													
HOME ADDRESS													
EMAIL ADDRESS													
PHONE NUMBER	НОМЕ					C	ELL			WO	RK		
ARE YOU EMPLOYED	Y N			OTHER									
	E		O SOUR			URCE	OF						
	S			INCOME									
NAME OF EMPLOYER													
ADDRESS													
TELEPHONE													
TYPE OF JOB	F/T	•	P/T		SEAS	ONA	L	CAS	UAL	HOUR	S PEF	R WEEK	
JOB TITLE													
DEPENDANTS	HOW			AGES				NAI	ME OF SPO	DUSE			
	MA	ANY											
MONTHLY EXPENSES									MONTHLY INCOME				
RENT/MORTGAGE	\$							\$					
CAR LOAN	\$							\$					
INSURANCE	\$							\$					
CREDIT CARD(S)	\$								\$				
CHILD SUPPORT	\$								\$				
UTILITIES	\$								\$				
PERSONAL LOANS	\$								\$				
OTHER	\$ \$												
TOTAL	EXI	EXPENSES \$							INCOME	\$			
I can make monthly payments toward my \$									on t	he _		of	
outstanding fines each month									each month				
If my driver's licence is suspended or remains													
suspended, my family and I will be affected in													
the following ways (explain):													
Other information which you feel is relevant to													
this application, such as current payment plan,													
reasons for request for change of payment plan													
or details of other fines outstanding.													
I confirm that the info													_
requested by the Court and will be relied on by the Court to determine whether or not to grant this													
extension. I acknowledge that this information is collected under the authority of the Provincial													al
Offences Act and that if payments are not made as proposed, this information may be used to													
enforce current or future defaulted POA fines.													
Date:		Signature:											