ONTARIO COURT
of JUSTICE

COUR de JUSTICE
de l'ONTARIO
Name of Your Region

CERTIFICATE OF PAYMENT
Under Section 68 of the *Provincial Offences Act*

CERTIFICAT DE PAYMENT
Conformément à *l'article 68 de la* Loi sur les infractions provinciales

Court of Justice Act
Loi sur les tribunaux judiciaires
R.R.O. 1990, Reg. 200
R.R.O. 1990, Règl. 200

Defendant's First & Last Name
Defendant's Address
City, Province
Postal Code

FILE #: SEE APPENDIX

I.....Name of Court Manager.....Clerk of the Ontario Court of Justice
Je soussigné(e) Name of Court Manager *, greffier de la Cour de Justice de l'Ontario*

At ..... Name of Your Region
à

CERTIFY THAT:
CERTIFIE QUE:

On the **SEE APPENDIX**

a fine of **SEE APPENDIX** (including costs and Victim Fine Surcharge)
une amende de *$(y compris les dépens et la suramende compensatoire)*

was imposed upon ..... **Defendant's Name**
a été ***imposée à Defendant's Name*** (name of defaulter/*nom de la partie défaillante)*
by the court.
par le tribunal.

1. Costs incurred for fine enforcement of **$Admin Costs** were added.
   Des frais de Admin Costs$ relatifs à l'exécution de l'amende ont été ajoutés.

2. The total amount has been paid in full **$** **8,235.00** **Fine Amount**
   Le montant total en souffrance est de **279.00** **Legal Fees**
   285.88 **Interest**

Certified at Your City/Town ***Total*** ***$*** ***8,799.88***
Copie certifiée

This _____ day of, _____ 2019
le *jour de*

ALL DOCUMENTATION PURSUANT TO THIS CERTIFICATE SHALL BE DIRECTED TO:

NAME OF YOUR MUNICIPALITY
ONTARIO COURT OF JUSTICE
ADDRESS
CITY, PROVINCE, POSTAL CODE

Telephone: (905) xxx-xxxx

_____
Clerk / Greffier

CERTIFICATE OF PAYMENT
Appendix

Name: **Defendant's Name**

Address: **Defendant's Address**
City, Province
Postal Code

File Number	Conviction Date	Fine Imposed (including fine/cost & VFS)	Total Amount Paid
2860-999-xx-xxxx-00	06/12/10	$8,195.00	$8,799.88

Certified at Your City/Town
Copie certifiée

This _____ day of _____ , 2019
Le jour de

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ONTARIO COURT OF JUSTICE
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CITY, PROVINCIE, POSTAL CODE

Telephone: (905) xxx-xxxx

_____
Clerk / Greffier