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| |  |  | | --- | --- | | Approved form no.: 16, version 1.2, 08/2019  Email: [registrarmhc@health.qld.gov.au](mailto:registrarmhc@health.qld.gov.au) | **Proceeding number:** | | | | | | | | |
| **Section 1 - Person subject of reference** | | | | | | | |
| **Surname:** | | | **Given name(s):** | | | | |
| **Also known as:** | | | **Date of birth (DD/MM/YYYY):** | | |  | **Age** |
| **Address:** | | | | | | | |
| **Town / Suburb:** | | | | **State:** | | | **Postcode:** |
| **Email address:** | | | | **Contact number:** | | | |
|  | | | | | | | |
| **Section 2 - Details of offence(s), including summary offences** | | | | | | | |
| **Number** | **Offence** | **Date of offence** (DD/MM/YYYY) | **Court** | | **Court file number /  indictment number** | | |
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| **Additional schedule of offences is attached** | | | | | | | |
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| **Section 3 - Schedule of exhibits** | | | | | | | |
| |  |  |  | | --- | --- | --- | | **INDEX** |  | | | **Reference** | | | | 1.1 | |  | | **Reports** | | | | 2.1 | |  | | **Submissions** | | | | 3.1 | |  | | **Transcripts** | | | | 4.1 | |  | | **Police Material** | | | | 5.1 | |  | | **Criminal History** | | | | 6.1 | |  | | **Hospital Records** | | | | 7.1 | |  | | **Previous Material** | | | | 8.1 | |  | | **Miscellaneous** | | | | 9.1 | |  | | | | | | | | |

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| |  |  | | --- | --- | | Approved form no.: 13, version 1.2, 08/2019  Email: [registrarmhc@health.qld.gov.au](mailto:registrarmhc@health.qld.gov.au) | Proceeding number: | | | | | |
| **Section 1 - Details of offence(s), including summary offences** | | | | |
| Name of person: | | | | |
| **Number** | **Offence** | **Date of offence** (DD/MM/YYYY) | **Court** | **Court file number /  indictment number** |
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