**From:** Sharon.Burns@met.pnn.police.uk on behalf of CO16Mailbox-.NorthProsecutionFPN@met.pnn.police.uk

Sent: 13 February 2015 12:41 To: lorraine32@blueyonder.co.uk

Subject: RE: Simon Cordell 011403134612

**From:** Lorraine Cordell [mailto:lorraine32@blueyonder.co.uk]

**Sent:** 13 February 2015 11:05

To: GL-BrentMCeng@hmcts.gsi.gov.uk

Cc: CO16 Mailbox - North Prosecution FPN; CO16Mailbox-.SouthProsecutionFN@met.pnn.police.uk; CO16

Mailbox - South Prosecution CJU; CO16 Mailbox - North Prosecution CJU;

London.magistratescentralwest@cps.gsi.gov.uk **Subject:** RE: Simon Cordell 011403134612

To Whom It May Concern:

## Complaint

I am writing this email again due to a case being heard at court and me being found guilty. On the 26/01/2015 Case number: 011403134612, I believe the old case number was 011401596899.

I have emailed the court many times due to this case I and in my emails attached my insurance documents

I Have done a statutory declaration which I included my insurance documents.

I know my file must have had my insurance document within there as it was included in many emails to the court and asked for my emails and documents to be put on my file.

I had no letters from the court to say a date of a hearing of the 26/01/2015, I have asked in emails that have been sent for any dates to be also copied over to me by email, as there does seem to be an issue with my post.

My mum Lorraine Cordell and I have asked in many emails and phone calls to the court for the police officer who checks documents to get him to check my documents which will confirm I am insured.

None of this has been done and again I have been found guilty at court for no insurance when I was insured to drive

I am making this request to have my case listed in order that I can do the following;-

- 1. Application to set aside the conviction
- 2. Re-open the case

My name: Mr Simon Paul Cordell

DOB: 26/01/1981.

Address: 109 Burncroft Av

Enfield Middlesex EN3 7JQ

I am including in this email

- 1. Letter of Indemnity from KGM.
- 2. Policy of insurance form KGM.