

## **Inquiry into the Management of Child Sex Offender Information**

### **CONTACT DETAILS**

**Phone:**

**Email:**

**Organisation Name:**

**Organisation Postion:**

**Address:**

**Suburb:**

**State:**

**Postcode:**

**Your age group:**

### **YOUR SUBMISSION**

**Submission:**

Make offenders information public, tougher jail terms and reoffending.....to protect our children!!!!

**Are you interested in appearing before the committee in person to talk about your submission?**

No

### **FILE ATTACHMENTS**

**File1:**

**File2:**

**File3:**

**Confidentiality:**

I request the committee publish my submission, but remove my name

**Signature:**