

**FRANKLIN COUNTY MUNICIPAL COURT CLERK  
EXPUNGEMENT SECTION  
375 SOUTH HIGH STREET, 2ND FLOOR  
COLUMBUS, OH 43215  
(614) 645-1706**

**APPLICATION FOR EXPUNGEMENT – R.C. 2953.38**

\_\_\_\_\_ CRX \_\_\_\_\_

<b>Full Name:</b>	<b>Alias/Maiden Name:</b>	
<b>Address:</b>	<b>Phone Number:</b>	
<b>City:</b>	<b>State:</b>	<b>ZIP:</b>
<b>Date of Birth:</b>	<b>SSN:</b>	

<u>Conviction/Guilty Plea</u>	<u>FMC Case Number</u>	<u>Date of conviction/guilty plea</u>
<input type="checkbox"/> R.C. 2907.24 (soliciting)		
<input type="checkbox"/> R.C. 2907.241 (loitering)		
<input type="checkbox"/> R.C. 2907.25 (prostitution)		

I have participated in the CATCH court.

**On the back of this form, describe why you engaged in the acts that resulted in the listed conviction/guilty plea. Attach any supporting documents.**

The above-named applicant states that s/he was knowingly recruited, lured, enticed, isolated, harbored, transported, provided, obtained, or maintained and was compelled through force, fear, duress, or intimidation, to engage in the acts that resulted in the above-listed conviction/guilty plea. S/he has satisfied the requirements of R.C. 2953.38 for the expungement of records and requests that the Court expunge all official records in the case(s) referenced above.

\_\_\_\_\_  
Applicant or Attorney Signature Date

\_\_\_\_\_  
Defendant's Attorney Supreme Court #

\_\_\_\_\_  
Defendant's Attorney's Address Telephone Number

**CERTIFICATE OF SERVICE**

I, the undersigned, do hereby certify that a copy of this Application for Expungement was served upon the Prosecutor's Office on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
DEPUTY CLERK

