Cleveland Municipal Court Earle B. Turner, Clerk Office of the Clerk of Courts Criminal Division

Expungement Information Form

Is this case related to a case	of human trafficking? Yes□	No□
Defendant's Name:		
Case Number(s):		
Date of Birth:	Last Four Digits of SSN: XXX-XX-	
Current Mailing Address:		
City:	State:	Zip Code:
Defendant Phone Numbers:		
	Home	Work
Cell Phone Number	Alternate (Relative or Friend)	E-Mail Address
Text/Phone Notification Appr	oved: YES □ NO □	
Attorney's Name and Phone I	Number:	
	Name	Phone Number
Arresting Law Enforcement A	gency(s):	
Date(s) of Arrest:	Charge(s):	

Please submit this form along with your application for Expungement and \$50.00 filing fee to:

Cleveland Municipal Clerk of Courts Office

Justice Center - Level 3

1200 Ontario Street Level Three

Cleveland, Ohio 44113

Failure to provide the above information may result in the inability of certain agencies to accept and process the order if granted by the court.

The mission of the Clerk of Courts is to record and process all matters decided in the Cleveland Municipal Court. "WE CARE"

IN THE CLEVELAND MUNICIPAL COURT CUYAHOGA COUNTY, OHIO

City of Cleveland PLAINTIFF	Case No(s): a	
PLAINTIFF	b	
VS.	c	
DEFENDANT	JUDGE:	
D.O.B.	APPLICATION TO EXPUNGE RECORD O	
XXX-XX	CONVICTION	
SSN		
2953.32 for an order expunging the offi Applicant hereby provides the follo 1a. Case No:	ation to the Court pursuant to the Court pursuant to O.R.C. § icial records after a conviction in this case. owing information: Original Charge: Original Charge: Original Charge:	
2. Date of Conviction:	Original Charge.	
	c	
3. Date of Termination of Probation	on (if imposed):	
2. There are no criminal proceeding3. Rehabilitation of the Defendant	of the application is not prohibited by O.R.C. § 2953.32(A); and the court; are was attained to the satisfaction of the Court; defined the subject offender is not outweighed by any legitimate the records.	
	Respectfully submitted,	
Certificate of Service	Name (Please Print)	
A copy of the foregoing has been		
regular, U.S. Mail, postage prepaid day of, 20 Prosecuting Attorney for the City of	d on this, to the	
	Address	
Defendant	's Signature Phone	
	Email	