

**REQUEST FOR EXPUNGED FILE**

**FORMS REQUESTED:**

Date:

**COMPLAINT**

**AFFIDAVIT**

**JUDGE'S SHEET**

**SEALING ENTRY**

**OTHER:** \_\_\_\_\_

Please fill out the following information as completely as possible.

**CASE NUMBER** \_\_\_\_\_

**NAME ON CASE** \_\_\_\_\_

**CHARGE** \_\_\_\_\_

**DATE OF OCCURRENCE** \_\_\_\_\_

**JUDGE** \_\_\_\_\_

**EXPUNGEMENT DATE** \_\_\_\_\_

**YOUR RELATIONSHIP TO THE CASE** \_\_\_\_\_

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**I request to view the above expunged case:**

Signature \_\_\_\_\_

Name Printed \_\_\_\_\_

Sworn to before me and subscribed in my presence this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public