

**IN THE MUNICIPAL COURT
MIAMI COUNTY OHIO**

Applicant's Name : **Case No(s):** _____
: _____
: _____
: _____

Please Check One:

**APPLICATION TO SEAL RECORD OF CONVICTION PURSUANT TO R.C.
2953.32(B)(1)(a)**

**APPLICATION TO EXPUNGE RECORD OF CONVICTION PURSUANT TO R.C.
2953.32(B)(1)(b)**

APPLICATION TO SEAL RECORD OF NONCONVICTION PURSUANT TO R.C.

2953.33 Applicant is not depositing a fee with this application, as R.C. 2953.33 does not require a fee to seal records after a not guilty finding, dismissal or proceedings of a no bill by a grand jury or pardon.

**APPLICATION TO EXPUNGE RECORD OF CONVICTION FOR IMPROPERLY
HANDLING FIREARM IN MOTOR VEHICLE PURSUANT TO R.C. 2953.35**

**APPLICATION TO EXPUNGE RECORD OF CONVICTION AS VICTIM OF HUMAN
TRAFFICKING PURSUANT TO R.C. 2953.36**

The Applicant moves the Court to order the sealing or expungement of the record of conviction in this case and all related records pursuant to R.C. 2953.32 (B)(1)(a), 2953.32 (B)(1)(b), 2953.33, 2953.35 or 2953.36.

The Applicant hereby certifies all requirements for sealing or expunging the records are met.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date of Birth: _____ Last 4 digits of Social Security No.: _____

Attorney Information (if applicable)

Attorney Name: _____ Registration Number: _____

Address: _____

City, State _____ Telephone No. _____
Zip Code _____ \$

Attorney Signature: _____

Applicant Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____