## BUTLER COUNTY AREA \_\_\_\_ COURT

## \*\*\*INFORMATION REQUIRED WHEN FILING A SEALING/EXPUNGEMENT\*\*\*

Name:	
Address:	
Date of Birth:	_Social Security Number:
Phone Number:	_Cell Phone Number:
What charge(s) are you asking to have sealed?	
For all charges you are asking to have sealed, please	e provide date(s) of arrest
For all charges you are asking to have sealed, please	e provide case number(s)
For all charges you are asking to have sealed, please	e provide date(s) of conviction/dismissal
For all charges you are asking to have sealed, please	e provide date(s) of sentence
For all charges you are asking to have sealed, please	e provide what sentence(s) was imposed
	you paid all fines, costs, and restitution in full?If so nd restitution were paid
For any and all charges you are asking to have se provide date(s) probation was terminated	ealed, were you placed on probation?If so, please
after the offense(s) you are asking to have sealed?_ Name of Court:	se(s) before the offense(s) you are asking to have sealed on If so, please provide: Case Number
Date of Conviction	Date of Sentence