

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

Expungement/Seal of Record Information Form

Defendant's Name: _____ Case Number: _____

Date of Birth: _____ SSN: _____ Race: _____ Sex: _____

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 Approved YES NO

Attorney's Name and Phone Number: _____
Name Phone Number

Arresting Law Enforcement Agency: _____

Date of Arrest: _____ Charge(s): _____

Please submit this form with your application for Expungement/Seal of Record to:

**Earle B. Turner, Clerk of Courts Office
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.

**IN THE CLEVELAND MUNICIPAL COURT
CUYAHOGA COUNTY, OHIO**

CITY OF CLEVELAND,
Plaintiff

-vs-

Defendant

)
)
)
)
)
)
)

CASE NO. a. _____

CASE NO. b. _____

CASE NO. c. _____

JUDGE _____

**APPLICATION TO SEAL RECORD
AFTER NOT GUILTY OR DISMISSAL**

Applicant hereby makes an application to the Court pursuant to Section 2953.52 of the Ohio Revised Code for an order sealing the official records after a not guilty finding or a dismissal of the proceedings in this case.

Applicant hereby provides the following information:

1. a. Original Charge: _____

b. Original Charge: _____

c. Original Charge: _____

2. Date of Arrest or Incident: a. _____ b. _____ c. _____

3. Date of Not Guilty Finding or Dismissal: _____

4. Applicant's Current Address: _____

5. Applicant's Cell Phone #: _____

6. Applicant's SSN: _____ DOB: _____

7. Applicant's Email Address: _____

Applicant states that he/she was found not guilty in this case or the case was dismissed; that he/she has no criminal proceedings pending; and that the interests of applicant in having the records pertaining to this case sealed are not outweighed by any legitimate governmental needs to maintain those records.

Respectfully submitted,

Name (Please print)

Signature

Certificate of Service

A copy of the foregoing has been sent via regular, U.S. Mail, postage prepaid on this _____ day of _____, 20____, to the Prosecuting Attorney for the City of Cleveland.

Defendant's Signature