FRANKLIN COUNTY MUNICIPAL COURT CLERK EXPUNGEMENT SECTION 375 SOUTH HIGH STREET, 2ND FLOOR COLUMBUS, OH 43215 (614) 645-1706

APPLICATION FOR EXPUNGEMENT - R.C. 2953.38

			CRX	
Full Name:		Alias/Maiden Name:		
Address:		Phone Number:		
City:		State:	ZIP:	
Date of Birth:		SSN:		
Conviction/Guilty Plea	FCMC Case	Number	Date of conviction	 n/guilty plea
R.C. 2907.24 (soliciting)				<u></u>
R.C. 2907.241 (loitering)				
R.C. 2907.25 (prostitution)				
Applicant may list additional of □ I have participated in the CA On the back of this form, descriptea. Attach any supporting do The above-named applicant statransported, provided, obtained, engage in the acts that resulted in R.C. 2953.38 for the expungement case(s) referenced above.	TCH court. ribe why you engaged ocuments. ates that s/he was knor maintained and was in the above-listed conv	in the acts to accompled the iction/guilty	hat resulted in the listed co cruited, lured, enticed, isolation rough force, fear, duress, or plea. S/he has satisfied the	ated, harbored, intimidation, to requirements of
		Applicant or	Attorney Signature	Date
Defendant's Attorney				Supreme Court #
Defendant's Attorney's Address			Te	elephone Number
	CERTIFICATE	OF SERVICE		
I, the undersigned, do hereby certify th		n for Expungem	ent was served upon the Prosecu	tor's Office on this
		DEPUTY CLE	RK	

Rev. October 2018

Describe why you engaged in the acts that resulted in the listed conviction/guilty plea.				
	-			
(attach additional sheets if necessary)				
CATU				
OATH (Do not sign until deputy clerk or notary is present.)				
The above-named applicant does hereby swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.				
Y	our Signature			
Sworn before me and signed in my presence this day of	, ·			
	eputy Clerk or Notary Public			
N	1y Commission Expires:			

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(Additional Sheet for Convictions)

Conviction/Guilty Plea	FCMC Case Number	Date of conviction/guilty plea