

**REQUEST FOR PERMISSION TO FILE EARLY FOR
EXPUNGEMENT**

PETITIONER'S NAME:

DATE OF BIRTH:

SOCIAL SECURITY NUMER:

DRIVER'S LICENSE NUMBER:

PHONE NUMBER:

ADDRESS:

EMAIL ADDRESS:

**DETAILED CRIMINAL CONVICTION INFORMATION ORDERED BY COUNTY TO
INCLUDE:**

CASE NUMBER

OFFENSE (S) CONVICTED OF/CLASS OF OFFENSE (S)

DATE OF CONVICTION