Petition for Expunger IN THE JUDICIAL CIRC		
Judge:	_	Case Number:
		Court ORI No.:
	_ vs	S.
Petitioner		
		(Date File Stamp)
Defendant(s):	_	
Circuit Court Division		-
Associate Court Division	_ 🗆	Municipal Police Dept.
Municipal Court Division	_ 🗆	Missouri Highway Patrol Troop
Criminal Records Repository	Pro	secutor's Office (include name of county or city)
		County
		Municipal
☐ Other (include name and address of age	ency):	
Pursuant to section 610.122, RSMo, I requestarrest, for the following criminal case:		the court issue an order to expunge my record of
imposition of sentence (SIS) for the offer related to the arrest. I also state that the cause at the time of the action to expund be pursued as a result of the arrest; and	nse fo arres ge to b no civ	arrest occurred and I did not receive a suspended r which the arrest was made or for any offense t was based on false information; there is no probable believe that I committed the offense; no charges will wil action is pending relating to the arrest or the g my fingerprints on a standard fingerprint card for

I am filing this petition in the county where the arrest occurred. I was arrested for, or was subsequently charged with, a misdemeanor offense of chapter 303 or a moving violation as the term "moving violation" is defined under section 302.010, RSMo, except for any intoxication-related traffic or boating offense as "intoxication-related traffic offense" and "intoxication-related boating offense" are defined under section 577.001, RSMO; and each offense or violation related to the arrest was subsequently nolle prossed or dismissed, or I was found not guilty of each offense or violation; I am not a commercial driver's license holder and was not operating a commercial motor vehicle at the time of the arrest; and no civil action is pending relating to the arrest or the records sought to be expunged. I am providing my fingerprints on a standard fingerprint card for verification of my identity.

I have reason to believe the agencies named above as defendants may possess records subject to expungement.

Full Name	Full Name				Sex 🔲 M 🔲 F Race			
Date of Birth Social Secur Address at Time of Arrest		Social Security Numb		er Driver's License Number				
			Offense Charged					
Date of Arrest	Arrest Citation Nu	ımber If crimir	nal charges	were filed,	date of dismis	sal or reversa		
•	Petitioner was arrest red in a Municipality licipality)		Name of	Arresting A	gency			
Case Number and Division of Court of the Offense		of the Offense	Circ	cuit 🗌 A	Associate	Municipal		
		☐ Not Applicable						
swear the facts s	stated in the above	petition are true	according t	to my best k	knowledge and	belief.		
			F	Petitioner's	Signature/Add	ress		
Subscribed and s	sworn to before me t	his	day of					
My commission e	expires:			Notary Pub	olic/Judge/Cler	k		

Instructions to Clerk

1. A copy of the petition shall be issued to the prosecuting attorney.

- 2. A copy of the petition and the fingerprint card should be sent to the Missouri Criminal Record Repository.
- 3. Give notice of the hearing to the prosecuting attorney and each official, or agency, or other entity named in the petition.