IN	THE	COURT OF	(County),	(State)			
			PLAINTIFF				
(Nar	me of State)						
V.	V.		CAUSE NO				
(Nar	me of Defenda	nt)	DEFENDANT/PET	ITIONER			
	Motion f	or New Trial for Purpo	se of Expunging Crimi	nal Record			
	above-captione		_ <b>(Name of Plaintiff)</b> , Pl h his attorney and move sons:				
	Petitioner, (name of petitioner), was convicted on (date), of the offense of (description of nature of offense)						
on h	nis plea of guilty	before the Honorable .		(Name of Judge);			
			(date				
				·····;			
3.	Petitioner has fully complied with the Court's order of probation;						
		OR					
	Petitioner has completed his term of imprisonment;						
4.	Petitioner had not been convicted of (any offense or any felony)						
prior	r to the date of	sentencing;					
<b>5.</b> sent	Petitioner hatencing;	ıs not been convicted o	f any offense subsequer	nt to the date of			
6.	The convicti	on for <b>(description of c</b>	offense)				
ham	pers Petitioner	's employment opportu	nities in the near future;				

7. This Honorable Court has the discretion and statute or rule) to	• •					
WHEREFORE, Petitioner requests that this new trial for the purpose of expunging Petitioner's r	•					
	Respectfully submitted,					
	(Name of Defendant)					
	By:					
	(Signature of Attorney) Defendant's Attorney State Bar No.					
Certificate of Service						
This is to certify that I,						
(Name of Attorn	ney)					
(Post Office Box						
(City, State, Zip C	code)					
This theday of	, 20					
	Respectfully Submitted,					
	(Name of Defendant)					
	By					
	(Signature of Attorney) Defendant's Attorney					

	State Bar No			
OF COUNSEL:				
(Name of Attorney) Post Office Box				
City, State, Zip Code Telephone:				
Notice of Motion for New Trial for Pu	rpose of Expunging Crimir	nal Record		
You are notified that on soon thereafter as counsel can be heard, in Court for County, (County) Courthouse at	<i>(State)</i> , at the		as —	
Defendant (Na attorney, will bring on for hearing his Motion Criminal Record for the reasons stated in the	<b>ame of Defendant)</b> , by and the for New Trial for Purpose of	through his		
	Respectfully Sub	Respectfully Submitted,		
Attorney)	(Printed	Name	- of	
	(Signature of Attornation Defendant's Attornation State Bar No.	ney	-	
OF COUNSEL:				
(Name of Attorney) Post Office Box				
City, State, Zip Code Telephone:				