

**CAMBRIDGE MUNICIPAL COURT  
Cambridge, Ohio**

State of Ohio  
**Plaintiff**

-vs-

Case No. \_\_\_\_\_

\_\_\_\_\_  
**Defendant**

**APPLICATION FOR SEALING OF RECORDS**

Defendant/Applicant provides the following information and makes application to this court for an order sealing the official records of the following case/s.

Full Name:	Name, if Different, on the Case:
Current Mailing Address:	City:
State:                      Zip Code:	Phone No.:
Date of Birth:	Last 4 Digits of SSN:

Case Number	Charge	Result	Date of Result
		<input type="checkbox"/> Conviction <input type="checkbox"/> Not Guilty/Dismissal <input type="checkbox"/> Bail Forfeiture	
		<input type="checkbox"/> Conviction <input type="checkbox"/> Not Guilty/Dismissal <input type="checkbox"/> Bail Forfeiture	

**(Use additional Page 3 if necessary.)**

Defendant/Applicant states that he/she has no criminal matters currently pending.

Defendant/Applicant is applying to seal these records for the following reason/s:

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Defendant/Applicant states that s/he qualifies for a sealing of records under the applicable provisions of R.C. Chapter 2953. If the records to be sealed include a conviction, Defendant/Applicant also requests that any accompanying charges that were dismissed be sealed.

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Defendant/Applicant Signature

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Attorney for Defendant/Applicant

**CERTIFICATE OF SERVICE**

I, the undersigned, do hereby certify that a copy of this *Application for Sealing of Records* was served upon Cambridge Law Director on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

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### Additional Cases to be Included in Application

Case Number	Charge	Result	Date of Result
		<input type="checkbox"/> Conviction <input type="checkbox"/> Not Guilty/Dismissal <input type="checkbox"/> Bail Forfeiture	
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