

IN THE _____ COURT
_____ COUNTY, OHIO

Applicant Name

Case No.

Judge:

**Application to Expunge Record of Conviction as
Victim of Human Trafficking Pursuant to R.C.
2953.38**

The Applicant moves the Court to order the expungement of record of conviction as a victim of human trafficking pursuant to R.C. 2953.38. In support of this application, the Applicant provides the following information:

1. Please complete the following (you may attach additional pages if necessary):

Date	Offense	Court or Location

2. Please describe the evidence and provide copies of any document showing you are entitled to have the records expunged (you may attach additional pages if necessary).

The Applicant hereby certifies all requirements for expunging the records are met.

Name of Applicant

Name of Attorney (if applicable)

Signature of Applicant (if pro se)

Signature of Attorney (if applicable)

Street Address of Applicant

Attorney Registration No. (if applicable)

City, State, and Zip Code of Applicant

Street Address of Attorney (if applicable)

Driver's License No. of Applicant (if applicable)

City, State, and Zip Code of Attorney (if applicable)

Telephone of Applicant (if pro se)

Email Address of Attorney (if applicable)

Telephone of Attorney (if applicable)

(TO BE COMPLETED BY THE COURT)

SERVICE

A copy of this application was served by this Court on the Office of the Prosecutor
for _____, this _____ day of _____, 20_____.