STATE OF LOUISIANA

VERSUS

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MOTION FOR EXPUNGEMENT

NOW INTO COURT comes mover, who provides the court with the following information in connection with this request:

I. DEFENDANT INFORMATION

NAME: _____ _____ _____
(Last Name) *(First Name)* *(Middle Initial)*

DOB: _____/_____/_____ (MM/DD/YYYY)

GENDER ☐ Female ☐ Male

SSN (last 4 digits): XXX-XX-_____

RACE: _____

DRIVER LIC.# _____

ARRESTING AGENCY: _____

SID# (if available): _____

ARREST NUMBER: _____

Mover is entitled to expunge the record of his arrest/conviction pursuant to Louisiana Code of Criminal Procedure 971 et seq. and states the following in support:

II. ARREST INFORMATION

1. Mover was arrested on _____/_____/_____ (MM/DD/YYYY)

2. ☐ YES ☐ NO A supplemental sheet with arrests and/or convictions is attached after page 2 of this Motion.

3. Mover was:

☐ YES	☐ NO	Arrested, but it did not result in conviction
☐ YES	☐ NO	Convicted of and seeks to expunge a misdemeanor
☐ YES	☐ NO	Convicted of and seeks to expunge a felony

4. Mover was booked and/or charged with the following offenses: (List each offense booked and charged separately. (Attach a supplemental sheet, if necessary.)

☐ **Yes** ☐ **No** **ARRESTS THAT DID NOT RESULT IN CONVICTION**

ITEM NO. 1

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Time expired for prosecution ____/____/_____ (MM/DD/YYYY)
☐ Not prosecuted for any offense arising out of this charge.
☐ Pre-trial Diversion Program.
☐ DWI Pre-Trial Diversion Program and 5 years have elapsed since the date of arrest.
☐ Charge dismissed
☐ Found not guilty/judgment of acquittal

ITEM NO. 2

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Time expired for prosecution ____/____/_____ (MM/DD/YYYY)
☐ Not prosecuted for any offense arising out of this charge.
☐ Pre-trial Diversion Program.
☐ DWI Pre-Trial Diversion Program and 5 years have elapsed since the date of arrest.
☐ Charge dismissed
☐ Found not guilty/judgment of acquittal

ITEM NO. 3

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Time expired for prosecution ____/____/_____ (MM/DD/YYYY)
☐ Not prosecuted for any offense arising out of this charge.
☐ Pre-trial Diversion Program.
☐ DWI Pre-Trial Diversion Program and 5 years have elapsed since the date of arrest.
☐ Charge dismissed
☐ Found not guilty/judgment of acquittal

☐ Yes ☐ No **MISDEMEANOR CONVICTIONS**

ITEM NO. 1

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 894(B) ____/____/_____ (MM/DD/YYYY)
☐ More than 5 years have passed since completion of sentence.

ITEM NO. 2

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 894(B) ____/____/_____ (MM/DD/YY
☐ More than 5 years have passed since completion of sentence.

☐ Yes ☐ No **FELONY CONVICTIONS**

ITEM NO. 1

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 893(E) ____/____/_____ (MM/DD/YYYY)
☐ More than 10 years have passed since completion of sentence.

ITEM NO. 2

La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____

☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 893(E) ____/____/_____ MM/DD/YYYY
☐ More than 10 years have passed since completion of sentence.

☐ Yes ☐ No **OPERATING A MOTOR VEHICLE WHILE INTOXICATED CONVICTIONS**

Mover has attached the following:

☐ A copy of the proof from the Department of Public Safety and Corrections, office of motor vehicles, that it has received from the clerk of court a certified copy of the record of the plea, fingerprints of the defendant, and proof of the requirements set forth in C.Cr.P.Art. 556, which shall include the defendant's date of birth, last four digits of social security number, and driver's license number

5. Mover has attached to this Motion the following pertinent documents:

☐ Criminal Background Check from the La. State Police/Parish Sheriff dated within the past 30 days (required).
☐ Bill(s) of Information (if any).
☐ Minute entry showing final disposition of case (if any).
☐ Certification Letter from the District Attorney for fee waiver (if eligible).
☐ Certification Letter from the District Attorney verifying that the applicant has no convictions or pending applicable criminal charge in the requisite time periods.
☐ Certification Letter from the District Attorney verifying that the charges were refused.
☐ Certification Letter from the District Attorney verifying that the applicant did not participate in a pretrial diversion program.
☐ A copy of the order waiving the sex offender registration and notification requirements.

The Mover prays that if there is no objection timely filed by the arresting law enforcement agency, the district attorney's office, or the Louisiana Bureau of Criminal Investigation and Information, that an order be issued herein ordering the expungement of the record of arrest and/or conviction set forth above, including all photographs, fingerprints, disposition, or any other such information, which record shall be confidential and no longer considered a public record, nor be made available to other persons, except a prosecutor, member of a law enforcement agency, or a judge who may request such information in writing, certifying that such request is for the purpose of prosecuting, investigating, or enforcing the criminal law, for the purpose of any other statutorily defined law enforcement or administrative duties, or for the purpose of the requirements of sex offender registration and notification pursuant to the provisions of R.S. 15:541, et seq. or as an order of this Court to any other person for good cause shown, or as otherwise authorized by law.

If an "Affidavit of No Opposition" by each agency named herein is attached hereto and made a part hereof, Defendant requests that no contradictory hearing be required and the Motion be granted ex parte.

Respectfully submitted,

_____
Signature of Attorney for Mover/Defendant

_____
Attorney for Mover/Defendant Name

_____
Attorney's Bar Roll No.

_____
Address

_____
City, State, Zip Code

_____
Telephone Number

If not represented by counsel:

_____
Signature of Mover/Defendant

_____
Mover/Defendant Name

_____
Address

_____
City, State, ZIP Code

_____
Telephone Number

SUPPLEMENTAL SHEET

☐ YES ☐ NO **ARRESTS THAT DID NOT RESULT IN CONVICTION**

ITEM NO. _____ La. Rev. Stat. Ann. § _____ :_____
Name of the offense _____
☐ Time expired for prosecution ____ / ___ / _____
(MM/DD/YYYY)
☐ Charge refused by DA - not prosecuted.
☐ Pre-trial Diversion Program.
☐ Charge dismissed
☐ Found not guilty/judgment of acquittal

ITEM NO. _____ La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____
☐ Time expired for prosecution _____/____/_____
(MM/DD/YYYY)
☐ Charge refused by DA - not prosecuted.
☐ Pre-trial Diversion Program.
☐ Charge dismissed
☐ Found not guilty/judgment of acquittal

ITEM NO. _____ La. Rev. Stat. Ann. § _____ :
Name of the offense _____
☐ Time expired for prosecution _____/____/_____
(MM/DD/YYYY)
☐ Charge refused by DA - not prosecuted.
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☐ Charge dismissed
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ITEM NO. _____ La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____
☐ Time expired for prosecution _____/____/_____
(MM/DD/YYYY)
☐ Charge refused by DA - not prosecuted.
☐ Pre-trial Diversion Program.
☐ Charge dismissed
☐ Found not guilty/judgment of acquittal

SUPPLEMENTAL SHEET

☐ **YES** ☐ **NO** **MISDEMEANOR CONVICTIONS**

ITEM NO. _____ La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____
☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 894(B) _____/____/_____ (MM/DD/YYYY)
☐ More than 5 years have passed since completion of sentence.

ITEM NO. _____ La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____
☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 894(B) _____/____/_____ (MM/DD/YYYY)
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ITEM NO. _____ La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____
☐ Conviction set aside/dismissed pursuant to C.Cr.P. Art. 894(B) _____/____/_____ (MM/DD/YYYY)
☐ More than 5 years have passed since completion of sentence.

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CERTIFICATION OF FEE WAIVER

To be completed by defendant and submitted to the District Attorney's Office prior to filing. Append completed form to Motion of Expungement at filing only if eligible.

DEFENDANT NAME	
DATE OF BIRTH	
SSN#	
DATE OF ARREST	
DOCKET NUMBER	
CHARGE	

In accordance with Louisiana Code of Criminal Procedure Article 983, the Office of the District Attorney has reviewed the available databases and determined that
(Check all that apply. To be completed by authorized personnel from the District Attorney's Office and returned within 15 days to defendant.):

☐ The arrestee listed above has NO FELONY CONVICTIONS.

AND

☐ The arrestee listed above has NO PENDING FELONY CHARGES UNDER A BILL OF INDICTMENT OR INFORMATION.

AND

☐ The arrestee listed above WAS ACQUITTED after trial of all charges derived from the arrest listed above, including any lesser and included offense.

OR

☐ The arrestee listed above WAS NOT PROSECUTED WITHIN THE TIME LIMITATIONS prescribed in Chapter 1 of Title XVII of the Code of Criminal Procedure and the arrestee did not participate in a pretrial diversion program for the arrest listed above.

OR

☐ The case involving the arrestee listed above was dismissed or the district attorney declined to prosecute the case prior to the time limitations prescribed in Chapter 1 of Title XVII of the Code of Criminal Procedure, and the arrestee did not participate in a pretrial diversion program.

OR

☐ The arrestee listed above has been determined to be factually innocent and entitled to compensation for a wrongful conviction pursuant to the provisions of R.S. 15:572.8.

_____
District Attorney or his designee - Print Name

_____ _____, 20_____
District Attorney or his designee Signature Date