**IN THE _____ COURT FOR _____ COUNTY**

# REMOVAL OF CRIMINAL OFFENDER RECORD PURSUANT TO T.C.A. §40-32-101(j)

**State Control Number**_____

State of Tennessee vs _____

General Sessions Docket No._____ Circuit Docket No._____

**Defendant/Arrest Information:**

_____ _____ _____ _____
*Defendant (name used at time of arrest)* *Race* *Sex* *Date of Birth*

_____ _____
*Arresting Agency* *Date of Arrest*

_____ _____
*Charge 1 (original arrest charge)* *SSN#*

_____ _____
*Charge 2 (original arrest charge)* *OCA#*

_____
*Charge 3 (original arrest charge)*

**Disposition Information:**

*Final Charge* *Final Disposition*

1_____

2_____

3_____

***The Defendant understands that this request will only remove the requested charges from the Tennessee Bureau of Investigation database, the National Crime Information Database, and/or any public electronic database maintained by the court clerk, pursuant to T.C.A. §40-32-101(j). This request will not expunge all records from any court file or other county database. Court clerks shall not be liable for any errors or omissions relating to the removal and destruction of records under this petition.**

_____ _____
*Defendant/Attorney for Defendant* *Date*

_____ _____
*District Attorney General* *Judge's Signature*