STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

State of Wisconsin

vs.

_____
Name

_____
Date of Birth

Petition to Expunge Court Record of Conviction

Case No. _____

UNDER OATH I STATE:

1. I am the person convicted in this case. I am asking that the court record of my conviction be expunged. I understand that if the record is expunged:
   - only the court record of the conviction will be expunged;
   - other court records and records of the police, the Crime Information Bureau, other law enforcement agencies, and the district attorney will not be affected, AND
   - the conviction is not vacated or set aside.

2. I was sentenced on or after July 1, 2009.

3. I was
   - ☐ a. under the age of 25 at the time of the commission of the offense, and
     - was convicted of a misdemeanor, OR
     - was never previously convicted of a felony, AND
       - was convicted of a Class H felony that was not a violent offense as defined under §301.048(2)(bm) and was not a violation of §940.32, §948.03(2) or (3), or §948.095, Wis. Stats., OR
       - was convicted of a Class I felony that was not a violent offense as defined under §301.048(2)(bm), Wis. Stats. and was not a violation of §948.23, Wis. Stats.
   - ☐ b. under the age of 18 at the time of the commission of the offense and was convicted of a violation of §942.08(2)(b), (c), or (d), Wis. Stats..

☐ 4. At the time the sentence was imposed, the court ordered that the record be expunged upon successful completion of the sentence.

☐ 5. I have successfully completed my sentence because I have not been convicted of a subsequent offense and, if I was placed on probation, I was not revoked and satisfied the conditions of probation.

☐ 6. The detaining or probationary authority has issued a certificate of discharge. A copy is attached.

State of _____
County of _____
Subscribed and sworn to before me on _____

_____
Notary Public/Court Official

_____
Name Printed or Typed

My commission/term expires: _____

▶ _____
Petitioner

_____
Name Printed or Typed

_____
Address

_____

_____
Date

DISTRIBUTION:
1. Original - Court
2. Petitioner
3. District Attorney

This form shall not be modified. It may be supplemented with additional material.