IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR THE COUNTY OF MULTNOMAH JUVENILE DEPARTMENT 1401 NE 68th AVENUE PORTLAND, OREGON 97213

| | HE WAT | TER OF: |))) | | (For Office U | ise Only) | | | |
|----|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|-----------------------|-------------|-------------------|----------------------------|--|--|--|
| 1. | Nam | ne of Applicant on record | , | | | DOB: | | | |
| | | Last der: ☐Male ☐Female | ļ | First | Middle | | | | |
| 2. | Curr | ent Name of ApplicantLast | · · | First | Middle | DOB: | | | |
| 3. | Othe | er Names that may appear in Juven | | | | | | | |
| | Aka: | | | | | | | | |
| 4. | Addr | ess: Street | City | | State | Zip | | | |
| | Phor | ne | _ | | | | | | |
| 5. | | Application cannot be used to e e cases were dismissed. | xpunge any adult m | atters, inc | luding Ballot N | leasure 11 cases, even if | | | |
| 6. | I am a person who is a subject of a Juvenile Court Record and seeks to have my record(s) expunged. | | | | | | | | |
| 7. | Under penalty for false-swearing, I represent to the Court and hereby swear the following to be true: | | | | | | | | |
| | I have never been found within the jurisdiction of the Juvenile Court because my case was: | | | | | | | | |
| | dismissed without adjudication; | | | | | | | | |
| | dismissed after a conditional postponement; | | | | | | | | |
| | handled with a Formal Accountability Agreement with the Juvenile Department; | | | | | | | | |
| | handled informally by the Juvenile Department; or | | | | | | | | |
| | | no Court action warning | letter sent. | | | | | | |
| 3. | I was found within the jurisdiction of the Juvenile Court, and | | | | | | | | |
| | A. | A. At least five years have have not elapsed since my most recent termination (case closure) which occurred on | | | | | | | |
| | B. | Since the date of the above terr Misdemeanor in Adult Court. | mination, I 🗌 have 🛭 |] have no | t been convicted | d of any Felony or Class A | | | |
| | C. | There are are not current seeking a criminal conviction or | t cases pending agair | nst me in A | \dult or Juvenile | Court. Proceedings | | | |

| D. | I ☐ do ☐ do not presently have an open delinquency case or dependency case. | | | | | | | |
|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------|--------|--|--|--|--|
| E. | I have read the list of non-expungable offenses and I \square have \square have not been found within the jurisdiction of the Court for any of the non-expungable offenses. | | | | | | | |
| F. | ☐ I do not meet other statutory requirements for expunction but I am requesting that the Court find that expunction would be in my best interest as well as the best interest of the public. | | | | | | | |
| G. | G. I have reason to believe the following courts, juvenile departments, institutions s Human Services (DHS) or the Oregon Youth Authority, police agencies, law enf and/or other agencies have copies of the records I seek to expunge. | | | | | | | |
| | Agencies: | | | | | | | |
| | | | | | | | | |
| In considerati record. | on of the above representations which I r | represent to be true, I hereby a | apply for expunction of my juv | enile | | | | |
| DATED THIS | DAY OF | , 20 | | | | | | |
| | | Applicant | | | | | | |
| ***** | *********************************The below portion is t | o be completed in front of a | Notary*************** | ****** | | | | |
| STATE OF O | REGON) | | - | | | | | |
| County of Mu | | | | | | | | |
| r I | | ulu awara an aath danaaa an | any that I am the applicant in | tho | | | | |
| | d proceeding, that I have read the foregoing personal knowledge. | lly sworn on oath, depose and ng application, know the conto | ents thereof, and the same is | true | | | | |
| | | | | | | | | |
| | | Applicant | | | | | | |
| SUBSCRIBEI | O AND SWORN to before me this | day of | , 20 | | | | | |
| | | Notary Public for | | | | | | |
| | | My Commission Expire | e | | | | | |

Expunction Application/mstrfrms/dk/10-16-17