State of Minnesota County of: Judicial District:			District Court	
			Court File Number:	
			Case Type: <u>Criminal</u>	
		of Minnesota		
VS	intiff			
VJ				
Def	fenda	ant		
		•	xpungement of a Cannabis Offense tat. § 609A.055 (EXP202)	
•	60	'	uest automatic expungement under Minn. Stat. § the county where the criminal case is located. No t and no hearing will be held.	
•	If the court grants your request, an expungement order will be sent to you, the Minnesota Bureau of Criminal Apprehension, the law enforcement agency that issued the citation or initiated the charges, and the office that prosecuted your case. If the court denies your request, a copy of the denial order will be sent to you and to the prosecutor.			
•	dir Se	ected to additional local and state a	ent order under Minn. Stat. § 609A.03, which can be agencies, including the Department of Human Notice of Hearing and Petition for Expungement,	
	1.	List the case number of the case y	ou are asking the court to expunge:	
	2.	List the date of offense:		
	3.	List your full name:		
		First:		
		Middle:		
	4.	List any other legal names or aliase	es you have been known as:	

5.	List your date of birth:		
6.	List your current addres	SS:	
	Street Address:		
	City, State, Zip: _		
7.	Reasons for this Reque	st.	
	Why do you qualify for	an automatic expungement?	
	I qualify for an automat	ic expungement because:	
	<del>-</del>	a violation of Minn. Stat. § 152.024, § 152.025, or § 152.027 and we been discharged and dismissed under Minn. Stat. § 152.18,	
	☐ I was convicted of o 152.027, subd. 3 or	r received a stayed sentence for a violation of Minn. Stat. § 4;	
	cause for charges u	all charges were dismissed prior to a determination of probable order Minn. Stat. § 152.021, subd. 2(a)(6); § 152.022, subd. subd. 2(a)(5); § 152.024, subd. 2(2); § 152.025, subd. 2(1); or § 4; or	
	under Minn. Stat. §	or proceedings were resolved in favor of the person for charges 152.021, subd. 2(a)(6); § 152.022, subd. 2(a)(6); § 152.023, subd. 2(2); § 152.025, subd. 2(1); or § 152.027, subd. 3 or 4.	
	The following 3 statements must also be checked and true to qualify:		
	$\square$ All charges in this case qualify under the grounds identified above.		
<ul> <li>□ I was <i>not</i> found incompetent to proceed; and</li> <li>□ I was <i>not</i> found not guilty by reason of mental illness or cognitive impairment.</li> </ul>			
Date: _		Signature:	
		Name:	
County	and state where signed:	Address:	
		City/State/Zip:	
		Phone:	
		Email:	