

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT,
IN AND FOR SEMINOLE COUNTY, STATE OF FLORIDA

STATE OF FLORIDA

Case No.: _____

(Plaintiff)

VS.

(Defendant)

PETITION TO EXPUNGE/HUMAN TRAFFICKING VICTIM

The petitioner, _____, by and through the undersigned attorney, petitions this honorable court, under Florida Rule of Criminal Procedure 3.693 and section 943.0583, Florida Statutes, to expunge all criminal history record information in the custody of any criminal justice agency and the official records of the court concerning the petitioner's arrest and/or conviction on _____ (date(s)), by _____ (arresting agency and/or prosecuting authority), for _____ (charges and/or offenses), and as grounds therefor shows:

1. On _____ (date(s)), the petitioner, _____, a _____ (race/sex), whose date of birth is _____ (date of birth), was arrested by _____ (arresting agency), and charged with _____ (charges) or was convicted by _____ (name of prosecuting authority) of _____ (offenses).

2. The petitioner has been the victim of human trafficking, as discussed in section 787.06, Florida Statutes, and has committed, or is reported to have committed, an offense, other than those offenses listed in section 775.084(1)(b)1, Florida Statutes, which was committed, or reported to have been committed, as a part of a human trafficking scheme of which he/she was the victim or at the direction of an operator of the scheme as evidenced by the attached official documentation of his/her status, or may be shown by clear and convincing evidence presented to the Court.

WHEREFORE, the petitioner moves to expunge any criminal history record information and any official court records regarding his/her arrest and/or conviction by _____ (arresting agency and/or name of prosecuting

authority, for _____ (charges and/or offenses, on (date(s)).

I HEREBY CERTIFY that a true and correct copy of the foregoing pleading has been served on _____ (name of prosecuting authority), (check one) _____ State Attorney for the _____ Judicial Circuit, in and for _____ County, _____ Special Prosecutor, _____ Statewide Prosecutor; _____ (arresting agency); and _____ (Sheriff of county in which defendant was arrested, if different); on _____ (date).

Signature of Petitioner

Name: _____

Address: _____

City/State: _____

Telephone Number: _____

E-mail Address: _____

Fla. Bar No.: _____

Personally known _____ or produced identification _____

Type of identification procedure _____

My commission expires: