



11. The arresting officer (affiant) was \_\_\_\_\_ of the  
Police Department located at \_\_\_\_\_

12. The OTN for the above-captioned case is \_\_\_\_\_ .

WHEREAS, the defendant requests that this Honorable Court dismiss the charges and expunge the defendant's arrest record for the above-captioned case.

By signing this document, I certify that the above statements are true and correct. This certification is made subject to penalty under Section 4904(b) of the Pennsylvania Crimes Code regarding false statements.

Respectfully submitted,

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Date:



8. The arresting officer (affiant) was \_\_\_\_\_ of the \_\_\_\_\_  
Police Department located at \_\_\_\_\_.

9. The OTN for the above-captioned case is \_\_\_\_\_.

10. The criminal justice agencies upon which certified copies of the order shall be served:

1. The Clerk of Court of Bucks County, Criminal Division.
2. The Bucks County District Attorney's Office.
- 3.

Above, Insert Name and Address of Police Department or other Arresting Agency.

4.

Above, Insert Name of Magisterial District Judge, District Court Number and Address.

5. The Bucks County Department of Adult Probation.

The Bucks County Clerk of Courts shall serve a certified copy of this Order on each of the criminal justice agencies identified.

Upon receipt of a certified copy of this Order, the identified criminal justice agencies shall: (a) expunge and destroy the official and unofficial arrest and other criminal records of the defendant concerning the listed charges; (b) request, insofar as they are able, the return of such records as they have made available to Federal and other Commonwealth agencies and shall destroy such records upon receipt thereof; (c) provide

to the defendant an affidavit that such records have been expunged and destroyed, together with any copies of this order in their possession.

BY THE COURT:

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J.

**VERIFICATION**

I, \_\_\_\_\_, verify that the facts set forth in the foregoing are true and correct to the best of my knowledge, information, and belief. The undersigned understands that the statements therein are made subject to the penalties of 18 Pa.C.S. Subsection 4904, relating to unsworn falsification to authorities.

\_\_\_\_\_

Date:

**IN THE COURT OF COMMON PLEAS OF BUCKS COUNTY  
CRIMINAL DIVISION**

**COMMONWEALTH OF PENNSYLVANIA   :   CASE NO. 20       -**  
   :  
**v.**   :  
   :  
   :  
   :

**CERTIFICATE OF SERVICE**

A true and correct copy of the attached Motion was served upon the Bucks  
County District Attorney's Office on \_\_\_\_\_ .

Date: \_\_\_\_\_