



City of Cleveland

Frank G. Jackson, Mayor

Department of Public Safety
Division of Police
Calvin D. Williams, Chief
1300 Ontario Street
Cleveland, Ohio 44113-1648
Tel. 216/623-5005 Fax 216/623-5584

Date: _____

RE: REQUEST TO EXPUNGE ARREST RECORD PER ORC 2953.52

Dear Chief Williams:

On _____, I was arrested by the Cleveland Division of Police for:

I request that the above arrest be expunged from my Criminal Record because I was released without charges being filed against me. No court attendance was required on my behalf, and no Grand Jury hearing was held.

Full Name: _____

Current Address: _____

City: _____ State _____ Zip _____

Date of Birth: ____/____/____ Sex: _____ Race: _____

Social Security Number: _____-_____-_____

Contact Phone Number: (_____) _____-_____

Thank you in advance for your prompt attention to this matter.

Respectfully,

(Signature)