

VIRGINIA: IN THE CIRCUIT COURT OF \_\_\_\_\_  
Name of Court

\_\_\_\_\_, )  
 )  
 Petitioner )  
v. ) CL: \_\_\_\_\_  
 )  
 Commonwealth of Virginia, )  
 )  
 Respondent. )

**EXPUNGEMENT PETITION  
MULTIPLE CRIMINAL CHARGES**

Petitioner \_\_\_\_\_ represents to the Court as follows:

1. Petitioner's full name used at the time of arrest: \_\_\_\_\_;  
Petitioner's date of birth: \_\_\_\_\_.

2. Petitioner seeks expungement of the following criminal record:

a. Most recent charge eligible for expungement:

Court in which the charge was brought: \_\_\_\_\_;

Case Number: \_\_\_\_\_;

Date of arrest: \_\_\_\_\_;

Arresting agency: \_\_\_\_\_;

Crime charged: \_\_\_\_\_;

Disposition of the charge: \_\_\_\_\_;

Date of disposition: \_\_\_\_\_.

A certified copy of the warrant together with the case disposition is attached to the petition.

b. Prior charges eligible for expungement:

3. Petitioner states she/he was not guilty of the crime charged.

4. Petitioner has not been charged with commission of a crime since the final

disposition of the last charge sought to be expunged.

Other criminal charges (if any) that are not eligible for expungement:

Court in which the charge was brought: \_\_\_\_\_;

Case Number: \_\_\_\_\_;

Date of arrest: \_\_\_\_\_;

Arresting agency: \_\_\_\_\_;

Crime charged: \_\_\_\_\_;

Disposition of the charge: \_\_\_\_\_;

Date of disposition: \_\_\_\_\_.

- 5. Petitioner was charged with commission of a misdemeanor; and, upon information and belief, there is no good cause that could be shown by the Commonwealth to deny the expungement relief sought.

WHEREFORE, Petitioner respectfully requests that the Court grant an order of expungement for the records in Case Number \_\_\_\_\_ pursuant to Virginia Code § [19.2-392.2](#) F.

\_\_\_\_\_  
Petitioner's Signature

Subscribed and sworn to (or affirmed) before me this day:

\_\_\_\_\_  
DATE

CLERK  DEPUTY CLERK  NOTARY PUBLIC (MY COMMISSION EXPIRES \_\_\_\_\_)

\_\_\_\_\_  
Name of Counsel

\_\_\_\_\_  
Name and Address of Law Firm or Pro Se Party

\_\_\_\_\_  
Printed Name of Counsel or Requesting Party

\_\_\_\_\_  
Virginia State Bar No.

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
E-mail address (optional)

### CERTIFICATE OF SERVICE

I certify that a true copy of the above \_\_\_\_\_ was  
Name of Pleading

mailed faxed \_\_\_\_\_, \_\_\_\_\_ electronically mailed, by  
Fax No. Time

agreement, and/or hand-delivered to all counsel of record on \_\_\_\_\_  
Month Day Year

to<sup>1</sup>:

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Name and Address of Counsel of Record and/or Parties not Represented by Counsel

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Moving Party/Counsel of Record

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<sup>1</sup> Virginia Supreme Court Rules [1:12](#), [1:7](#) (amendment effective October 15, 2003) and [4:15\(e\)](#) (amendment effective January 1, 2003).