

GEORGETOWN COUNTY APPLICATION FOR AN EXPUNGEMENT

MAILING ADDRESS: ATTENTION: MRS. MARJORIE H. COOPER OFFICE OF THE SOLICITOR, POST OFFICE BOX 1688, GEORGETOWN, SC 29440 TELEPHONE: 843-545-3169

LEGIBLY PRINT ALL INFORMATION REQUESTED.

FULL LEGAL NAME	First		Middle	Last
NAME AS IT APPEA	RS ONWAF	RRANT/TICKET/INDICTMEI	NT:	
RACE: SEX:	_AGE:	DATE OF BIRTH:	SOCIAL SEC	URITY NO:
DAY TIME TELEPHO	ONE NUMB	ER:		_
MAILING ADDRESS	b:			
WARRANT/TICKET/	INDICTMEN		ARREST DATE:	
ARREST CHARGE:				
IF APPLICABLE/REI	MANDED TO	O CHARGE:		
DISPOSITION DATE	E:	COURT WHERE	DISPOSED:	
NOT GUILT	Y/DISMISSE	D/NOL PROSSED	FORF	EIT BOND/CONVICTED
		ΔΡΡΙΙΟΔΝ	IT'S SIGNATURE	

Revised: April 20, 2016