

IN THE CIRCUIT COURT OF THE 99th JUDICIAL CIRCUIT
ANY COUNTY, ILLINOIS
 THE PEOPLE OF THE STATE OF ILLINOIS)
)
 vs.) CASE NO. 00-CF-0000
)
JAMES DOE)
 Defendant/Petitioner)

**PETITION TO SEAL FELONY DRUG CONVICTION AND/OR FIRST OFFENDER
 DRUG PROBATION**

COMES NOW the Defendant/Petitioner, pursuant to 20 ILCS 2630/5.2(c) and moves this court to seal the records of his/her felony drug conviction and/or first offender drug probation and all related records from the records of the Arresting Authority, the Circuit Clerk and the Department of State Police with regard to the following arrest:

Charge: <u>POSSESSION OF CANNABIS</u>	Date of Arrest/Charge: <u>01/01/2000</u>
Arresting Authority: <u>ANYTOWN POLICE DEPARTMENT</u>	
ID #: _____	Date of Birth: <u>02/02/72</u> Sex: <u>M</u> Race: <u>WHITE</u>
Petitioner's Current Mailing Address:	
Street/P.O. Box: <u>111 N. 1st STREET</u>	
City: <u>ANYTOWN</u>	State: <u>IL</u> Zip: <u>60000</u>

In support of this Petition, Defendant/Petitioner states as follows:

1. Defendant/Petitioner was arrested by the Arresting Authority or charged by the State on the date and for the offense stated above.
2. The Defendant/Petitioner was placed on first offender probation under:
 - Section 10 of the Cannabis Control Act (720 ILCS 550/10); OR
 - Section 410 of the Controlled Substances Act (720 ILCS 570/410); OR
 - Section 70 of the Methamphetamine Control and Community Protection Act (720 ILCS 646/70); OR
- The Defendant/Petitioner was convicted of a Class 4 offense under:
 - Section 4 of the Cannabis Control Act (720 ILCS 550/4); OR
 - Section 402 of the Controlled Substances Act (720 ILCS 570/402); OR

- The Methamphetamine Precursor Control Act; OR
- The Steroid Control Act.

3. Defendant/Petitioner completed his/her sentence on 07/01/2003.

4. If the Defendant/Petitioner is seeking to seal felony records listed in paragraph 2 of this Petition, he/she has attached to this petition proof that the Defendant/Petitioner has passed a drug test taken within the 30 days previous to the filing of this Petition which shows the absence within Defendant/Petitioner's body of any illegal substances as defined by the Illinois Controlled Substances Act, the Methamphetamine Control and Community Protection Act and the Cannabis Control Act.

5. At least 4 years have elapsed since the termination of Defendant/Petitioner's last sentence for any criminal offense.

6. (Check whichever applies):

- Defendant/Petitioner has no other arrests or convictions in this or any other jurisdiction; OR

Defendant/Petitioner has other arrests or convictions, unrelated to the case sought to be sealed, which are listed and attached to this Petition.

7. Defendant/Petitioner has paid all costs and fees for filing this Petition, or has been granted a fee waiver by the Court.

WHEREFORE, the Defendant/Petitioner prays that the Defendant's record of arrest and/or conviction and all related records be sealed as allowed by law.

01/01/2012
Date

[Signature]
Defendant/Petitioner

SAMPLE

VERIFICATION BY CERTIFICATION

SAMPLE

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief, as to such matters the undersigned certifies as aforesaid he/she verily believes the same to be true.

Date 01/01/2012

[Signature]
Defendant/Petitioner

Subscribed and sworn to before me this 1st day of JANUARY, 2012

My Commission Expires

[Signature]
Notary/Clerk

SAMPLE

SAMPLE

SAMPLE

Prepared by:
Name JAMES DOE Atty No. N/A
Address 111 N. 1ST STREET Attorney for N/A
City/State/Zip ANYTOWN ZL 0000 Telephone 123-456-7890

ADDITIONAL ARRESTS AND CONVICTIONS:

SAMPLE
 Date of Arrest: 01/01/95

Arresting Authority: ANYTOWN
POLICE DEPARTMENT
Case No(s): 95-CA-0000

Charging Jurisdiction: ANY COUNTY
ILLINOIS

Charge(s): DISORDERLY
CONDUCT

Disposition(s) 6 MONTHS
CONDITIONAL DISCHARGE,
\$100 FINE

Date of Completion of Case: 08/15/95

SAMPLE

Date of Arrest: _____

Arresting Authority: _____

Charging Jurisdiction: **SAMPLE**

Case No(s): _____

Charge(s): _____

Disposition(s) _____

Date of Completion of Case: _____

SAMPLE

Date of Arrest: _____

Arresting Authority: _____

Charging Jurisdiction: _____

Case No(s): _____

Charge(s): **SAMPLE**

Disposition(s) _____

Date of Completion of Case: _____