

In the Court of Common Pleas  
County of \_\_\_\_\_  
\_\_\_\_\_ Judicial District

普通诉讼法院  
\_\_\_\_\_ 县  
\_\_\_\_\_ 司法管辖区



Commonwealth of Pennsylvania  
Pennsylvania 联邦

v / 诉

Docket No / 案号: CP \_\_\_\_\_ 20 \_\_\_\_\_

**Petition for Expungement Pursuant to  
Pa.R.Crim.P. 790**

**依据 Pa.R.Crim.P. 790 的记录删除申请**

AND NOW, the petitioner avers the following and requests that this petition for expungement pursuant to Pa.R.Crim.P. 790 be granted for the reasons set forth below.

现在, 申请人提出下列主张, 并要求依据 Pa.R.Crim.P. 790 提出的记录删除申请因下文所列原因获得批准。

PETITIONER INFORMATION / 申请人信息						
Full Name: 全名:		DOB: 出生日期:		Social Security Number: 社会安全号码:		
Address: 地址:		Alias(es): / 别名:				
CASE INFORMATION / 案件信息						
List name, address of the Judge of the Court of Common Pleas or Philadelphia Municipal Court who accepted the guilty plea or heard the case: / 列出接受认罪答辩或审理案件的普通诉讼法院或 Philadelphia 市法院的法官姓名、地址:						
Judge: 法官:			Address: 地址:			
Philadelphia Municipal Court or Court of Common Pleas Docket Number: / Philadelphia 市法院或普通诉讼法院 案号:			Offense Tracking Number (OTN): 犯罪追踪号码 (OTN):			
Name of Arresting Agency: 逮捕机构名称:			Date of Arrest: 逮捕日期:		Date on Complaint: 诉状日期:	
List name and mailing address of the affiant as shown on the complaint, if available: / 列出诉状所示宣誓人姓名和邮寄地址 (如有):						
Name of Affiant: 宣誓人姓名:			Address: 地址:			
List specific charges, as they appear on the charging document, to be expunged and the disposition of each charge (please attach additional sheet(s) of paper if necessary): / 列出诉讼文书所示的待删除记录的具体控告和各项控告的处置结果 (如有必要请另附页):						
PA Statute (Title) PA 法规 (标题)	Section 章节	Subsection 分段	Statute Description 法规描述	Counts 罪名	Grade 等级	Disposition 处置结果

<p>If the sentence imposed included a fine, costs or restitution, has the amount due been paid? / 若所判处的刑罚包括罚款、费用或赔偿, 应付款项是否已支付? <span style="margin-left: 100px;"><input type="checkbox"/> Yes/是</span> <span style="margin-left: 100px;"><input type="checkbox"/> No/否</span></p>
<p>List the reason(s) for the expungement (please attach additional sheet(s) of paper if necessary): / 列出删除记录的理由 (如有必要请另附页):</p>
<p><input type="checkbox"/> I have attached a copy of my Pennsylvania State Police Criminal History which I have obtained within 60 days before filing this petition. / 我已附上于提交此申请前 60 日内取得的我的 Pennsylvania 州警方犯罪前科副本。</p>
<p><input type="checkbox"/> I have not attached a copy of my Pennsylvania State Police Criminal History. State reason(s) below: / 我未附上我的 Pennsylvania 州警方犯罪前科副本。原因说明如下:</p>

**When this petition is filed with the Clerk of Courts, the petitioner shall serve a copy upon the attorney for the Commonwealth.**

本申请提交至法院书记员处时, 申请人应向联邦检察官送达副本。

I, the undersigned petitioner, avers that the facts set forth in this petition are true and correct to the best of my personal knowledge or information and belief, and are made subject to the penalties of unsworn falsification to authorities under 18 Pa.C.S § 4904.

本人作为下方签名的申请人, 主张据我个人所知所信, 此申请所列事实均真实正确, 且此等事实均依据 18 Pa.C.S § 4904 在承担对权威部门提供未经宣誓的伪证之惩罚的前提下提出。

\_\_\_\_\_  
**Signature of Petitioner**  
 申请人签名

\_\_\_\_\_  
**Date**  
 日期