

# **XENIA MUNICIPAL COURT**

**MICHAEL K. MURRY, JUDGE**

101 N. Detroit St. • Xenia, Ohio 45385

937-376-7294 • 937-376-7288 (fax)

**R. James Creamer**  
Clerk of Court

**Jessica Stutes**  
Chief Deputy Clerk

**Diane L. Bryan**  
Chief Deputy Clerk

**Robert Coy**  
Chief Bailiff

**Kim Ramey**  
Court Reporter

**Carlos Walker**  
Program Director

## **PROCEDURE FOR SEALING OF RECORDS**

Dear Applicant,

You have asked about applying for Sealing of Records through the Xenia Municipal Court. IF YOU HAVE AN ATTORNEY, he/she will instruct and guide you through the process, but in every case, a Questionnaire and Eligibility Worksheet must be filed.

In order to complete this investigation thoroughly, it is vital that you complete all the requested information that is attached. This information is to be reviewed and then completed to the best of your knowledge. Please do not leave any question boxes empty. Indicate with an "N/A" any questions that do not apply to your specific situation. If during the course of this investigation it is determined that you have provided false information or have failed to cooperate in any fashion with the investigator, your application **will be denied**. Please type or write legibly on the application.

**IMPORTANT NOTICE:** Xenia Municipal Court is not permitted to seal records relating to traffic cases or convictions for the following criminal offenses:

Aggravated Menacing, Menacing By Stalking, Intimidation, Sexual Imposition, Escape,  
Domestic Violence and some Child Endangering cases.

In order to begin the process you will need to complete and return. . .

- 1) Sealing of Records Questionnaire,**
- 2) \$50.00 filing fee,** *NOTE: The Court accepts cash, personal check (IF check address and bank are within this court's jurisdiction), credit card (IF card holder present). There is a 4% transaction fee for use of credit/debit card. If residing outside Court's jurisdiction, please remit filing fee by money order, cashier's check, or certified check payable to Xenia Municipal Court.*
- 3) signed Eligibility Worksheet** indicating your review of all items on that page.
- 4) signed Application** (prepared by clerk at time of filing at court (\*see below if filing by mail).

**IF YOU ARE SUBMITTING YOUR QUESTIONNAIRE, FEE, & WORKSHEET \*BY MAIL,** please include a SASE [(self-addressed stamped envelope) #10 business size with one stamp] for the notice of the official standardized application to be sent for your signature and return to the court.

**IF YOU ARE REQUESTING THE SEALING OF A RECORD AND YOU WERE FOUND NOT GUILTY OR YOUR CASE WAS DISMISSED,** you need only complete and return . . .

- 1) Sealing of Records Questionnaire – Dismissed/Not Guilty Cases (1 page)** (obtain from Xenia Municipal Court)
- 2) no filing fee for Dismissed cases or cases with finding of "not guilty"**

As part of this process, you will be contacted by a representative of Xenia Municipal Court regarding an interview. This should take place within approximately 3 weeks of filing, depending upon the number of applications currently under review, daily court docket, etc. Any questions regarding the Sealing of Records process may be addressed to the Court at 937-376-7289, 937-376-7297.

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## ELIGIBILITY WORKSHEET

Prior to your paying the filing fee(s) for sealing, this worksheet is a useful tool to help you determine if you believe you are indeed eligible to apply to have your record sealed.

**Any specific questions you have about eligibility should be directed to your attorney.**

### HOW DO I KNOW IF I AM LIKELY ELIGIBLE TO APPLY TO GET MY RECORD SEALED?

1. Is the conviction you want to seal one of the crimes listed on the first sheet? \_\_\_\_\_
2. Do you have any misdemeanor or felony convictions? \_\_\_\_\_  
  
If the answer to #2 is "yes," how many misdemeanor convictions \_\_\_\_\_  
and how many felonies? \_\_\_\_\_
3. Has more than one year passed since the "final discharge" in your misdemeanor case(s) or more than three years on your felony and one year on your misdemeanor case? \_\_\_\_\_  
(FINAL DISCHARGE means completion of all parts of the sentence(s), including jail time and/or community control-probation) **This question does not apply to dismissed cases.**
4. Do you have any criminal or traffic proceedings currently pending against you? \_\_\_\_\_
5. Have you ever had any other case(s) sealed? \_\_\_\_\_
6. Have you ever been convicted of OVI, Hit/Skip, Driving Under OVI suspension, or a felony traffic offense? \_\_\_\_\_
7. Have you paid all fines and court costs in your case(s)? \_\_\_\_\_

If you answered "Yes" to questions 3 and 7, and if you answered "No" to questions 1 and 4 above, you likely are eligible to apply to have your records sealed. However, your answers to questions 2, 5 and 6 may affect your eligibility. The Judge ultimately will decide whether to seal your records.

**NOTICE: Certain individuals and agencies have access to sealed records. If you have any questions regarding access to sealed records or any questions regarding your eligibility to have your record sealed, you should consult an attorney.**

My signature indicates that I HAVE REVIEWED this worksheet: \_\_\_\_\_

CASE NO : \_\_\_\_\_

DATE TO BE COMPLETED \_\_\_\_\_

XENIA MUNICIPAL COURT  
101 NORTH DETROIT STREET  
XENIA, OHIO 45385

## ***SEALING OF RECORDS QUESTIONNAIRE***

NAME : \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

ALSO KNOWN AS: \_\_\_\_\_  
(NICK NAME, ALIAS, OR OTHER NAME USED)

SOCIAL SECURITY NUMBER: \_\_\_\_\_

OPERATOR'S/DRIVER'S LICENSE NUMBER: \_\_\_\_\_

STATE THAT ISSUED OPERATOR'S LICENSE: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_  
(NUMBER, STREET, APT. #, CITY, STATE, ZIP CODE)

HOW LONG HAVE YOU LIVED THERE: \_\_\_\_\_

WHOM DO YOU LIVE WITH: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_  
(NUMBER, STREET, APT. #, CITY, STATE, ZIP CODE)

WHERE ARE YOU CURRENTLY EMPLOYED?: \_\_\_\_\_

HOW LONG HAVE YOU BEEN EMPLOYED THERE?: \_\_\_\_\_

AGE: \_\_\_\_\_ SEX: \_\_\_\_\_ RACE: \_\_\_\_\_

HGT: \_\_\_\_\_ WGT: \_\_\_\_\_ EYES: \_\_\_\_\_

HAIR (NATURAL COLOR): \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_  
(CITY, STATE OR COUNTRY)

IDENTIFYING MARKS (SCARS, TATTOOS, BIRTHMARKS, ETC.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. List all prior and current employers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Would it jeopardize your job if your employer was contacted? \_\_\_\_\_

3. Have you been convicted of any other violations (list both misdemeanors and felonies)?  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you ever been convicted of or pled guilty to "Non-Support of Dependents?" If yes, list the court and case number. \_\_\_\_\_  
\_\_\_\_\_

5. What major changes have occurred in your life since your prior conviction? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Why do you want your record sealed? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Why should the Court seal your record? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that all questions answered are true to the best of my knowledge.

\_\_\_\_\_  
Defendant

\_\_\_\_\_  
Date