

EXPUNCTION/ NON-DISCLOSURE EVALUATION SHEET

Instructions: For free evaluation, please complete the following info sheet and return it to our office via email, fax, or in person along with any documents relevant to the current status of the charge you are seeking to expunge.

Date: _____

CLIENT CONTACT INFORMATION

Name: _____ Home Phone No.: _____
Street Address: _____ Cell Phone No.: _____

Employer Name: _____

Work Phone No: _____
Mailing Address: _____
(if different from Street) _____
Alternate contact: _____
Email: _____

IDENTIFYING INFORMATION:

Any names know by/maiden: _____
Texas DL Number: _____ Exp. Date: _____
Social Security No: _____

INFORMATION ON CHARGE SOUGHT TO BE EXPUNGED

Name of Charge: _____ **Category of Offense:**
Date of Arrest: _____ (Check all that apply) (circle level)
Charging Agency: _____ Drug Case: Misd/Felony
County of Arrest: _____ DUI/DWI: Misd/Felony
Jail where booked: _____ Assault (physical): Misd/Felony
(or arresting agency- May be same as Charging Agency) _____ Sexual offense: Misd/Felony
Cause No. (if applicable) _____ Money was seized: Misd/Felony
Case No. (If applicable) _____ Ticketed offense: Misd/Felony
Citation No. (If applicable) _____ Other (please identify): Misd/Felony
Court where case filed: _____
(if applicable) _____

Status of Charges: Pending but no charges have been filed w/court:
(check or complete all that apply) Pending and charges have been filed w/ court:
Have already entered plea bargain:
Case is finalized & on appeal (or need to appeal):
Have been served with notice of seizure:
Have been served with notice of protective order:
If entered plea or already sentenced, list details of plea/sentencing: _____
Case dismissed because: _____
Case closed because: _____
Hearing or trial is set for: _____
Case is set for announcement on: _____
Other: _____

List any other times you have been arrested: _____

