*** CIRCUIT COURT FOR	City/County , MARYLAND
2.A.	City/County
VI. 3	ITTING AS A JUVENILE COURT
Located at	Court Address
	* Case Number(s):
In The Matter of:	
In The Matter of: Respondent / Petiti	oner *
DOD	*
DOB:	*
EXPUNGEMEN	NG POSITION ON PETITION FOR IT OF JUVENILE RECORDS
TO:State's Attorney for	
State 37 teorney for	
Street Address	
City	ate Zip Code
Maryland Rule 11-506(g)(3).  Within 30 days after the petition is served on the State's Attorney does not object to the pet You can use this form to set out your position	
Date	Clerk/Deputy Clerk
	**************************************
· · ·	for Expungement of Juvenile Records in the above- ows:
☐ The State's Attorney does not object to the captioned case.	Petition for Expungement of Juvenile Records in the above-
Date	Signature
	Name/Title
	Address
	City/State/Zip Code
	•
	Telephone Number/ Fax Number/ E-mail Address

This form is available electronically through mdcourts.gov/forms/.

Case No.	
C45C 1 10.	

## **CERTIFICATE OF SERVICE**

I certify that I served a copy of this notice upon	the following party or parties by $\square$ mailing
first class mail, postage prepaid, $\square$ hand delivery, on $\underline{}$	Date to:
Name -	Address  City/ State/ Zip Code
Name .	Address  City/ State/ Zip Code
Date	Signature

This form is available electronically through <u>mdcourts.gov/forms/</u>.