

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	MOTION FOR DESTRUCTION OF BIOMETRIC DATA AND ARREST RECORD	CASE NO.
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ORI _____ Court address _____ Court telephone no. _____

MI-
Police Report No.

<input type="checkbox"/> The State of Michigan THE PEOPLE OF <input type="checkbox"/> _____ _____	v	Defendant/Juvenile name, address, and telephone no. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">CTN/TCN</td> <td style="width:33%;">SID</td> <td style="width:33%;">DOB</td> </tr> </table>	CTN/TCN	SID	DOB
CTN/TCN	SID	DOB			
<input type="checkbox"/> Juvenile In the matter of _____					

Count	CRIME	CHARGE CODE(S) MCL citation/PACC Code

USE NOTE: This form is for use when the arresting agency or the Michigan State Police has failed to destroy the biometric data and arrest record as required by law or when the Michigan State Police has not destroyed the biometric data and arrest record because the defendant has had a prior conviction as stated in MCL 28.243(12)(h). This form is not for use in conjunction with setting aside an adjudication pursuant to MCL 712A.18e or setting aside a conviction pursuant to MCL 780.621.

MOTION

1. I, _____, state that on _____
Name (type or print) Date

- I was found not guilty of all offense(s) charged in this case, and the arresting agency and/or Michigan State Police has not destroyed the biometric data and arrest record as required by law.
- I was found not to be within the provisions of MCL 712A.2.
- The charges in this case were dismissed by nolle prosequi before trial, and the arresting agency and/or Michigan State Police has not destroyed the biometric data and arrest record as required by law.

2. This motion does not pertain to any sentence imposed under MCL 333.7411, MCL 600.1076(4), MCL 762.11-MCL 762.15, MCL 769.4a, MCL 750.350a, MCL 750.430, or to one of the crimes listed in MCL 28.243(14).

3. **I REQUEST** that my biometric data and arrest record be destroyed by the arresting agency and/or Michigan State Police.

Date

Signature

NOTICE OF HEARING

A hearing will be held on this motion on _____ at _____
Date Time

at _____ before Hon. _____
Location Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this motion and notice of hearing on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 2.107(C)(3).

Date

Signature