IN THE COURT OF COMMON PLEAS
JUVENILE COURT DIVISION
SANDUSKY COUNTY, OHIO

SEALING APPLICATION
(O.R.C. 2151.356)

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Please Print
Name _____
Last **First** **M.I.**
(Applicant should list name when the juvenile record was obtained, even if different now)

Date of Birth _____ **Current Age** ____ **Social Security Number** ____ - ___ - ____

Address _____

City _____ **State** _____ **Zip** _____ **Ph.** (_____) - _____ - _____

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