Name:			
Address:			
City, State, Zip	_		
Phone:			
Email:			
	IN THE JUSTICE COUR	T OF RENO TOWNSHI	P
		E, STATE OF NEVADA	-
	REQUEST TO SEAL DECR	IMINALIZED OFFENSE(S)	
Defendant			
Date of Birth			
pursuant to NRS 179 notice of the request	fendant hereby requests that the Co . If no written objection to the requise received the court shall grant the hearing on the request.	est is filed within ten judicial d	ays after the date which
Case No.:	Offense/Charge		Conviction Date
	_		
	_		
	_		
	_		
Date		Defendant Signatu	re