

VERSUS (Plaintiff)

(Defendant)

DOCKET NO.  
CITY OF HAMMOND  
SEVENTH WARD  
PARISH OF TANGIPAHOA  
STATE OF LOUISIANA  
BY CLERK:

FILED:

**CERTIFICATION OF FEE WAIVER**

*To be completed by defendant and submitted to the District Attorney's Office prior to filing. Append completed form to Motion of Expungement at filing only if eligible.*

DEFENDANT NAME	
DATE OF BIRTH	
SSN# (last 4 digits)	XXX-XX-
DATE OF ARREST	
DOCKET NUMBER	
CHARGE	

In accordance with Louisiana Code of Criminal Procedure Article 983, the Office of the District Attorney has reviewed the available databases and determined that:

*(Check all that apply. To be completed by authorized personnel from the District Attorney's Office and returned within 15 days to defendant.):*

The arrestee listed above has NO FELONY CONVICTIONS.

**AND**

The arrestee listed above has NO PENDING FELONY CHARGES UNDER A BILL OF INDICTMENT OR INFORMATION.

**AND**

The arrestee listed above WAS ACQUITTED after trial of all charges derived from the arrest listed above, including any lesser and included offense.

**OR**

The arrestee listed above WAS NOT PROSECUTED WITHIN THE TIME LIMITATIONS prescribed in Chapter 1 of Title XVII of the Code of Criminal Procedure and the arrestee did not participate in a pretrial diversion program for the arrest listed above.

**OR**

The case involving the arrestee listed above was dismissed or the district attorney declined to prosecute the case prior to the time limitations prescribed in Chapter 1 of Title XVII of the Code of Criminal Procedure, and the arrestee did not participate in a pretrial diversion program.

**OR**

The arrestee listed above has been determined to be factually innocent and entitled to compensation for a wrongful conviction pursuant to the provisions of R.S. 15:572.8.

**OR**

The arrestee listed above is a juvenile who has successfully completed any juvenile drug court program and is exempt from fees pursuant to Code of Criminal Procedure Article 983 (G).

\_\_\_\_\_  
District Attorney or his designee - Print Name

\_\_\_\_\_  
District Attorney or his designee - Signature

\_\_\_\_\_, 20\_\_\_\_\_  
Date