

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本, 仅供参考. 为了提供便利, 表格采用双语格式, 但向法院提交的表格必须用英语填写。



巡回法院

马里兰州

City/County
市/郡

SITTING AS A JUVENILE COURT
作为少年法庭而设立

Located at _____
地址 _____

Court Address
法院地址

* Case Number(s):

* 案件编号:

* _____
* _____
* _____
* _____

In The Matter of: _____

关于: _____

Respondent / Petitioner

被申请人/请愿人

DOB: _____

出生日期: _____

NOTICE CONCERNING POSITION ON PETITION FOR
EXPUNGEMENT OF JUVENILE RECORDS
对少年记录删除请愿书的立场说明通知

TO: _____

接收者: _____

State's Attorney for _____

州检察长

Street Address
街道地址

City
城市

State
州

Zip Code
邮政编码

A Petition for Expungement of Juvenile Records has been filed in the above-captioned case and served on your office. The court may grant the petition without a hearing if no timely objection is filed. See, Maryland Rule 11-506(g)(3).

少年记录删除请愿书已在上述案件中提交并送达您的办公室。如未及时提交异议, 法院无须举行听证会即可批准该请愿书。请参阅《马里兰州规则》第 11-506(g)(3) 条。

Within 30 days after the petition is served on you, please either file an objection or notify this office that the State's Attorney does not object to the petition, and therefore does not file an objection.

请在请愿书送达您后 30 天内提出异议, 或通知本办公室州检察长对该请愿书无异议, 因此不提出异议。

You can use this form to set out your position.

您可以使用此表说明您的立场。

Date
日期

Clerk/Deputy Clerk
书记官/副书记官

The State’s Attorney objects to the Petition for Expungement of Juvenile Records in the above- captioned case and as
州检察长对上述案件中的少年记录删除请愿书有异议，

reasons states as follows:
理由如下: _____

The State’s Attorney does not object to the Petition for Expungement of Juvenile Records in the above- captioned case.
州检察长对上述案件中的少年记录删除请愿书无异议。

Date 日期	Signature 签名
	Name/Title 姓名/职务
	Address 地址
	City/State/Zip Code 城市/州/邮政编码
	Telephone Number/ Fax Number/ E-mail Address 电话号码/传真号码/电子邮箱地址

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CERTIFICATE OF SERVICE
送达证明

I certify that I served a copy of this notice upon the following party or parties by mailing first class mail, postage
prepaid, hand delivery, on _____ to:
Date

本人证明, 本人已将此通知副本送达至以下诉讼各当事人处, 送达方式为 邮寄一类邮件(预付邮资) 亲手交
付, 送达日期为 _____ :
日期

Case No. _____
案件编号 _____

Name
姓名

Address
地址

City/ State/ Zip Code
城市/州/邮政编码

Name
姓名

Address
地址

City/ State/ Zip Code
城市/州/邮政编码

Name
姓名

Signature
签名

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