

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 The City Drive South MAILING ADDRESS: P.O. Box 14169 CITY AND ZIP CODE: Orange, CA 92863-1569 BRANCH NAME: Lamoreaux Justice Center	
CASE NAME:	
ORDER TO SEAL JUVENILE RECORDS – WELFARE AND INSTITUTIONS CODE SECTION 788	CASE NUMBER:

1. Name of petitioner (*specify aliases*): _____ Date of birth: _____
2. a. Date of hearing: _____ Dept.: _____ Room: _____
 b. Judicial officer (*name*): _____
3. The Court has read and considered the petition and the report of the probation officer.

THE COURT ORDERS

4. a. The petition for sealing of petitioner’s juvenile records in the custody of this court, agencies, and officials named below is granted or denied as specified below:

Petition/Case Number	Incident Number	Offense Date	Arresting Agency	Violations	Disposition (Sealing or Denial)

- See attachment (5) for additional orders.
- b. The destruction or retention of all sealed records according to Welfare and Institutions Code section 788(l).
- c. Date court records must be destroyed: _____ Court records must be retained.
- d. Date all other records must be destroyed: _____
5. The clerk will send a certified copy of this order to the clerk in each county in which a record is ordered sealed and a copy to each agency and official listed above.

Date: _____ _____ JUDICIAL OFFICER OF THE SUPERIOR COURT

[SEAL]	<p style="text-align: center;">CLERK’S CERTIFICATE</p> <p>I certify that the foregoing is a true and correct copy of the original on file in my office.</p> <p>Date: _____ Clerk, by _____, Deputy</p>
--------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------