

**Date  
Submitted:**

**GENESEO TOWN AND VILLAGE COURT  
119 Main Street  
Geneseo, New York 14454  
courts@geneseony.org**

TO: GENESEO TOWN AND VILLAGE COURT  
RE: CERTIFICATE OF DISPOSITION OR CONVICTION REQUEST

Date of Request: \_\_\_\_\_  
FIVE DOLLAR FEE PAID BY: CASH \_\_\_\_\_ M.O. \_\_\_\_\_ CREDIT \_\_\_\_\_

Defendant's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

Date of Offense: \_\_\_\_\_ Charges: \_\_\_\_\_  
Date of Arrest: \_\_\_\_\_ Date of Conviction: \_\_\_\_\_

REASON FOR REQUEST OF CERTIFICATE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please print name and address of person requesting certificate:

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_  
Current Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_

REQUEST FOR RELEASE OF SEALED INFORMATION

I hereby request opening of a sealed file for purpose of issuing a Certificate of Disposition or Certificate of Conviction for reason listed above. (DEFENDANT ONLY)

Signature \_\_\_\_\_ Date: \_\_\_\_\_

ID must be verified by COURT CLERK OR NOTARY PUBLIC:

Sworn to before me this \_\_\_\_ day of \_\_\_\_\_,  
Notary Public: \_\_\_\_\_