

SUPPLEMENTAL SHEET

_____ **Yes** _____ **No** **FELONY CONVICTIONS**

NO. _____ La. Rev. Stat. Ann. § _____ : _____
Name of the offense _____
Conviction set aside/dismissed _____/_____/_____
pursuant to C.Cr.P. Art. 893(E) (MM/DD/YYYY)
More than 10 years have passed since completion of sentence

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