

PROBATE COURT OF _____ COUNTY, OHIO
_____, JUDGE

IN RE: CHANGE OF NAME OF _____
(Present Name)
TO _____
(Requested Name)
CASE NO. _____

**AFFIDAVIT IN SUPPORT OF
APPLICATION FOR CHANGE OF NAME OF ADULT**
[R.C. 2717.06]

State of Ohio }
County of _____ } SS

The undersigned, in support of the Applicant's Application for Change of Name of Adult, deposes, says, and verifies the following:

Check all that apply:

- Applicant has been a bona fide resident of _____, County, Ohio, for at least sixty (60) days immediately prior to the filing of the Application;
- The Application is not made for the purpose of evading any creditors or other obligations;
- Applicant is not a debtor in any currently pending bankruptcy proceeding;
- Applicant has not been convicted of, pleaded guilty to, or been adjudicated a delinquent child for identity fraud;
- Applicant does not have a duty to comply with R.C. 2950.04 or R.C. 2950.041 because the Applicant was NOT convicted of, pleaded guilty to, or was adjudicated a delinquent child for having committed a sexually oriented offense or a child-victim-oriented offense;

Any other information relevant to the Application _____

All documentary evidence submitted with the Application is true, accurate, and complete.

Applicant

Sworn to before me and subscribed in my presence the _____ day of _____

Notary Public/Deputy Clerk