

**PROBATE COURT OF MAHONING COUNTY, OHIO
HON. ROBERT N. RUSU, JR., JUDGE**

IN RE: THE NAME OF _____
Present 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 all of the following:

- (1) The Applicant has been a bona fide resident of Mahoning, County, Ohio, for at least sixty (60) days immediately prior to the filing of the Application;
- (2) The Application is not made for the purpose of evading any creditors or other obligations;
- (3) The Applicant is not a debtor in any currently pending bankruptcy proceeding;
- (4) The Applicant has not been convicted of, pleaded guilty to, or been adjudicated a delinquent child for identity fraud;
- (5) The 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;
- (6) Any other information relevant to the Application _____

- (7) 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 _____, 20_____.

Notary Public