PROBATE COURT OF TRUMBULL COUNTY, OHIO
JAMES A. FREDERICKA, JUDGE

IN RE: THE NAME OF _____

<div align="center">(Present Name)</div>

TO: _____

<div align="center">(Requested Conformed Legal Name)</div>

CASE NO. _____

AFFIDAVIT IN SUPPORT OF APPLICATION
TO CONFORM LEGAL NAME OF MINOR
[R.C. 2717.06]

STATE OF OHIO)
)   **SS:**
COUNTY OF _____)

_State of Ohio, County of _____, SS._

The undersigned, in support of the Application to Conform Legal Name of Minor, deposes, says and verifies the following.

Check all that apply:

1) ☐ Applicant has personal knowledge of the facts stated in this Affidavit;

2) ☐ The minor has been a bona fide legal resident of this county for a period of at least 60 days;

3) ☐ The Application is not being made for the purpose of evading any creditors or other obligations;

4) ☐ The minor is not a debtor in any currently pending bankruptcy proceeding;

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

The Applicant certifies under penalty of perjury that the statements in this Affidavit are true and complete.

_____
Date

_____
Applicant

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

_____
Notary Public /Deputy Clerk

_____
Typed or Printed Name

Commission Expiration Date _____

FORM 21.09 - AFFIDAVIT IN SUPPORT OF APPLICATION TO CONFORM LEGAL NAME OF MINOR