

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

**IN RE: THE NAME OF** \_\_\_\_\_  
(Present Name)

**TO:** \_\_\_\_\_  
(Requested Conformed Legal Name)

**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 \_\_\_\_\_