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

CASE NO. \_\_\_\_\_

# **APPLICATION FOR CHANGE OF NAME OF ADULT**

[R.C. 2717.02 and 2717.03]

Applicant is an adult and has been a bona fide resident of this county for at least sixty (60) days immediately prior to the filing of this application.

Applicant requests a change of name from \_\_\_\_\_

to

for the following reason:

An affidavit in support of this Application is attached.

Attorne	y for Applicant	Applicant's Signature		
Typed or Printed Name		Typed or Printed Name		
Address		Address		
City	//////State /Zip	AMMAÔity AMMAMMA	<b>WWWS</b> tate Zip	
Telephone Number (include area code)		Telephone Number (ir	nclude area code)	
Attorne	y Registration No			

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 Warren 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 delinguent 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 this \_\_\_\_\_ day of \_\_\_\_\_, 20

Notary Public.

O, IOL		JOURNAL ENTRY SETTING HEARING AND ORDERING NOTICE
		et the Application for Change of Name in this case for hearing on, 20,, 20,
Notice notice:		earing shall be served in the following manner on all necessary parties who have not waived
C	]	By certified mail, return receipt requested
C	]	By personal service
	]	By publication once in a newspaper of general circulation in this county at least 30 days before the hearing
C	ב	Other:

Proof of service shall be filed with the Court before the hearing.

IN RE: THE NAME OF \_\_\_\_\_\_ Present Name

Date

Probate Judge

IN RE: THE NAME OF \_\_\_\_\_\_ Present Name

CASE NO. \_\_\_\_\_

# NOTICE OF HEARING ON CHANGE OF NAME

[R.C. 2717.08 and R.C. 2717.14]

Applicant has filed an Application for Change of Name in this Court requesting the change of name from \_\_\_\_\_ to A hearing on the Application will be held on \_\_\_\_\_, 20 \_\_\_\_ at \_\_\_\_\_ .M.in the Probate Court of Warren County, Ohio located at 900 Memorial Drive, Lebanon, OH 45036.

WARREN COUNTY PROBATE COURT:

BY: \_\_\_\_\_

Deputy Clerk

IN RE: CHANGE OF NAME OF		
	(Pres	sent Name)
CASE NO		
JUDGMENT EN	ITRY - CHANGE OF NAM	IE OF ADULT
On	an application for change	of name was heard by this Court. The
Court finds that Applicant has provided s	sufficient proof that the facts ir	n the application show reasonable and
proper cause for changing the name.		
The Court finds the applicant's complete n	name at birth was	,
Applicant's date of birth was		, and the place of birth was
City	County	State
Therefore, it is ORDERED the name of		
be changed to		
	Probate Jude	
	i iobate out	90

# **CERTIFICATION OF JUDGMENT ENTRY**

The above Judgment Entry – Change of Name of Adult is a true copy of the original kept by me as custodian of the records of this Court.

#### Probate Judge/Clerk

Ву \_

Deputy Clerk

Date

IN RE: CHANGE OF NAME OF _		
-	esent Name)	
CASE NO		
DECISION OF MAG	GISTRATE - CHANGE OF	NAME OF ADULT
On	an application for change	e of name was heard by this Court. The
Court finds that Applicant has provided	sufficient proof that the facts i	in the application show reasonable and
proper cause for changing the name.		
The Court finds the applicant's complete	name at birth was	,
Applicant's date of birth was		, and the place of birth was
City	County	State
Therefore, it is ORDERED the name of _		
be changed to		
	Probate Ma	gistrate

# **CERTIFICATION OF DECISION OF MAGISTRATE**

The above Decision of Magistrate – Change of Name of Adult is a true copy of the original kept by me as custodian of the records of this Court.

#### Probate Judge/Clerk

By \_

Deputy Clerk

Date