то			(Present Name)		
			(Requested Name)		
	APPLIC		ANGE OF NAME O 7.02 and 2717.03]	F ADULT	
	adult and has been or to the filing of this		of Clermont County, Oh	io, for at least sixty (60	) days
Applicant reque	ests a change of nar	me from			
	(First)		(Middle)		(Last)
to	(First)		(Middle)		(Last)
for the following	g reason:				
An affidavit in s	upport of this Applic	cation is attached.			
Attorney for Applicant		Applicant's Signature	Applicant's Signature		
Typed or Printed Name			Typed or Print	Typed or Printed Name	
Address			Address		
City	State	Zip	City	State	Zip
Telephone Number (include area code)			Telephone Nu	ımber (include area cod	de)
Email Address			Email Address	3	
Attorney Regist	tration No.				

FORM 21.0 - APPLICATION FOR CHANGE OF NAME OF ADULT

N RE:	CHAN	GE OF NAME OF(Present Name)
ГО		(Flesent Name)
		(Requested Name)
JAOL I		
		AFFIDAVIT IN SUPPORT OF
		APPLICATION FOR CHANGE OF NAME OF ADULT (R.C. 2717.06)
<b>.</b>		(R.G. 2717.00]
State of	Ohio	} }
County	of	}
The und	dersigne	ed, in support of the Applicant's Application for Change of Name of Adult, deposes, says, and verifies all
of the fo	ollowing:	
Check a	all that a	pply:
1.		Applicant has been a bona fide resident of Clermont 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.		Applicant is not a debtor in any currently pending bankruptcy proceeding;
4.		Applicant has not been convicted of, pleaded guilty to, or been adjudicated a delinquent child for identity fraud;
5.		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 oth	er inforn	nation relevant to the Application
-		
All docu	ımentar	y evidence submitted with the Application is true, accurate and complete.
		Annilianna
		Applicant
Sworn to	before	me and subscribed in my presence the day of,
20		
	•	
		Notary Public/Deputy Clerk

N RE: CHANGE OF NAME OF $\_$					
го	(Present Name)				
	(Requested Name)				
CASE NO.	<del></del>				
JUDGMENT	ENTRY - CHANGE OF NAME ( [R.C. 2717.09]	OF ADULT			
On	an application for change of name wa	s heard by this Court. The Court finds that			
Applicant has provided sufficient proof that	the facts in the application show reaso	onable and proper cause for changing the			
name. Applicant's date of birth was		, and the place of birth			
vas					
City	County	State			
Therefore, it is <b>ORDERED</b> the name of					
	(First) (Midd	lle) (Last)			
pe changed to(First)	04:10				
(First)	(Middle)	(Last)			
	James A	A. Shriver, Probate Judge			
CER <sup>-</sup>	TIFICATION OF JUDGMENT EN	NTRY			
The above Judgment Entry – Change of N of this Court.	ame of Adult is a true copy of the origin	nal kept by me as custodian of the record			
	James A. Shrive	er, Probate Judge			
	Ву:				
(Seal)	Deputy Clerk				
	Date				

CASE NO.	Present Name				
RELEASE FOR CRIMINAL BACKGROUND CHECK					
authorizing and requesting the Clermont make any and all examinations of my cri any other law enforcement information s civil and criminal history records, driving agency records that I may have in any fe	an application to change or conform my name, I am hereby to County Probate Court, its agents and authorized employees, to iminal record by obtaining from Ohio Courts Network (OCN) and system and any court system, current and previous residences, a records, birth records, public records or any criminal justice ederal, state, county, and municipal jurisdictions. I hereby release and all individuals connected therewith, from all liability in providing				
DATED	Social Security Number				
	Date of Birth				
	Drivers License Number/State Issued ID				
	A.K.A.				
	Address				
	Printed Name				
	Signature				