

PROBATE COURT OF CUYAHOGA COUNTY, OHIO

ANTHONY J. RUSSO, Presiding Judge

LAURA J. GALLAGHER, Judge

IN RE: THE NAME OF _____
(Present Legal Name)

TO _____
(Requested Conformed Legal Name)

CASE NUMBER _____

**AFFIDAVIT IN SUPPORT OF PUBLICATION FOR
APPLICATION TO CONFORM LEGAL NAME OF MINOR**

State of Ohio }
County of Cuyahoga } SS
}

Now comes, _____, being first duly cautioned and sworn, and hereby represents and says to the Court that the following statements are true:

That Applicant is the:

- | | |
|---|--|
| <input type="checkbox"/> parent | <input type="checkbox"/> legal custodian |
| <input type="checkbox"/> legal guardian | <input type="checkbox"/> guardian ad litem |

of the minor child.

Choose:

- ☐ The address of _____, the
☐ alleged father ☐ father

of the minor child, is unknown and cannot, with reasonable diligence, be reasonably ascertained. Applicant states that the alleged father's/father's last known address is:

_____.

- ☐ The address of _____, **the mother of the minor child**, is unknown and cannot, with reasonable diligence, be reasonably ascertained. Applicant states that the mother's last known address is:

_____.

Applicant has unsuccessfully attempted to locate the parent(s) by:

- | | |
|---|---|
| <input type="checkbox"/> Postal Records | <input type="checkbox"/> Inquiry of Family/Neighbors |
| <input type="checkbox"/> Board of Elections | <input type="checkbox"/> Credit Bureau |
| <input type="checkbox"/> Court Records | <input type="checkbox"/> Auto Title Registration |
| <input type="checkbox"/> Internet, including social media | <input type="checkbox"/> Offender (Inmate) Search
(appgateway.drc.ohio.gov/offendersearch) |
| <input type="checkbox"/> Mailing to last known address that was returned as undeliverable | |

- ☐ Contacted parent's reputed employer without success
(_____)
- ☐ Personally visited the parent's last known address and verified the parent no longer lives at that address
- ☐ Attempted contact at parent's last known telephone without success
- ☐ Child Support
- ☐ Other: _____

I understand this is a non-exhaustive list which is subject to review. I also understand that I must serve notice to the person(s) by other means permitted under Civ. R. 73 if I obtain the information necessary to do so.

Date

Signature of Applicant

Sworn to before me and subscribed in my presence this _____ day of _____, 20_____.

Notary Public

Printed Name of Notary Public

Commission Expiration Date: _____