

IN THE MATTER OF THE NAME OF _____
Minor's Present Legal Name

AFFIDAVIT FOR UNKNOWN ADDRESS OF A PARENT

STATE OF OHIO)
)
COUNTY OF BUTLER) SS:

The Applicant, being first duly sworn and cautioned, deposes and says that the address of _____, the biological _____ of the above named minor is unknown and cannot with reasonable diligence be ascertained and that _____ is free from disability other than minority.

Affiant states that the last known address of _____ is _____ and that he/she has attempted to locate him/her by: _____

[Check all that apply]

- ☐ Mailed correspondence to the last known address that was returned by the post office as undeliverable
- ☐ Personally went to the last known address and verified that he/she no longer resides at said address
- ☐ Contacted relative(s)
- ☐ Contacted friend(s)
- ☐ Contacted current employer or last known employer
- ☐ Contacted Child Support Enforcement Agency
- ☐ Other:

Affiant _____

This Affidavit was sworn to before me in my presence by _____ on _____, _____.

Notary Public

Typed or Printed Name _____

Commission Expiration Date _____