COURT OF COMMON PLEAS SANDUSKY COUNTY, OHIO PROBATE DIVISION

(First, Middle, and Last Name)

AFFIDAVIT OF APPLICANT

| STATE OF OHIO |) | |
|---------------|---|-----|
| |) | SS: |
| COUNTY OF |) | |

CASE NO.

The undersigned affiant is the applicant in this matter, and the individual who is the subject of the application, or a parent or legal guardian of the minor who is the subject of the application. The undersigned states:

- > Applicant or Minor Identifies as the sex opposite of that listed on their Birth Record.
- Applicant or Minor desires to have the Sex Marker changed on their Birth Record, to reflect the sex with which they identify.
- Applicant or Minor holds themself out to the public, to be the sex they desire the Birth Record to reflect.
- All of the facts presented in the Application to Change Sex Marker on Birth Record are true and correct.

The undersigned certifies under penalty of perjury that the statements in this Affidavit are true and correct.

Date

Affiant Signature

Sworn to and subscribed in my presence this _____ day of _____, 20____,

Notary Public