

Fiscal Department Budget Commission

## AFFIDAVIT OF IDENTITY

I, the	Amant, being	g duly sworn, nereby affirm th	at:	
1.	My legal name is			
2.	My date of birth is			
3.	My current legal address is			
	I certify und	nted to the notary public: Driver's License Passport State-Issued Identification Military ID er penalty of perjury, I hereby the best of my knowledge, are	declare and affirm that the Aff	idavit, and all of its
Affiant's Signature			Date _	
BE IT	'REMEMBI	ERED, that on	, 20, befor	e me,
who p is/are same i	roved to me subscribed in their cap	e on the basis of satisfacto to the within instrument o acity, and that by their sig	ory evidence to be the personal acknowledged to me the instrument to acted, executed the instrument to acted, executed the instrument.	on(s) whose name(s) at they executed the hat the person(s), or
_	•	e PENALTY OF PERJUR aph is true and correct.	Y under the laws of the Stai	e of Ohio that the
WITN	ESS my han	nd and official seal.		
Signat	ure			
Print Name				

9(6)E 90(6)