

AFFIDAVIT PURSUANT TO OHIO REVISED CODE SECTION 319.28

STATE OF OHIO)
)
COUNTY OF _____)

AFFIDAVIT

_____, affiant, being duly sworn states the following:

1. I am currently employed as a/an:
 - My Spouse is currently employed as a/an:

<ul style="list-style-type: none"> <input type="checkbox"/> Peace Officer <input type="checkbox"/> Parole Officer <input type="checkbox"/> Probation Officer <input type="checkbox"/> Bailiff <input type="checkbox"/> Prosecuting Attorney <input type="checkbox"/> Assistant Prosecuting Attorney <input type="checkbox"/> Correctional Employee <input type="checkbox"/> County or Multicounty Corrections Officer <input type="checkbox"/> Community-Based Correctional Facility Employee <input type="checkbox"/> Youth Services Employee 	<ul style="list-style-type: none"> <input type="checkbox"/> Firefighter <input type="checkbox"/> EMT <input type="checkbox"/> Medical Director or Member of a Cooperating Physician Advisory Board of an Emergency Medical Service Organization <input type="checkbox"/> State Board of Pharmacy Employee <input type="checkbox"/> Investigator of The Bureau Of Criminal Identification And Investigation <input type="checkbox"/> Judge <input type="checkbox"/> Magistrate <input type="checkbox"/> Federal Law Enforcement Officer
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2. My residential and familial information is not a public record under divisions (A)(1)(p) and (A)(7) of section 149.43 of the Revised Code.
3. I own real property in Fairfield County listed as Parcel No(s). _____
4. I hereby request that the Fairfield County Auditor remove my name from any record made available to the general public on the internet or a publicly accessible database, and from the general tax list and duplicate of real and public utility property, and to instead insert my initials on any such record, and on the general tax list and duplicate of real and public utility property as the name of the individual that appears on the deed.

Dated: _____.

FURTHER AFFIANT SAYETH NAUGHT.

Printed name: _____

Before me appeared the above-named person who under oath or by affirmation did sign this affidavit this _____ day of _____, 20_____.

Notary Public
My commission expires: _____