

AFFIDAVIT

STATE OF OHIO
FAIRFIELD COUNTY SS:

I, _____, Social Security No. _____

of _____ do hereby state that the sum of _____ is due me for an
(address)

uncashed Fairfield County Auditor's warrant no. _____ issued to me. I further state

that the date of the warrant no. _____ was _____.

Signature _____

Name: _____

Address: _____

Sworn to and before me and subscribed in my presence this

_____ day of _____, _____.

(Notary Signature)

