

Collections Enforcement
Office (614) 466-8360
Fax (614) 752-9050
30 E. Broad St., 14th Floor
Columbus, OH 43215

www.ohioattorneygeneral.gov

Instructions for Mistaken Identity Affidavit

Please include all lien information you have obtained (ex: tax identification number, serial number or account number) in the "RE:" section at the top, right hand corner of the affidavit. The affidavit must be <u>notarized</u> and the <u>original notarized affidavit</u> returned to our office by mail. In addition, we will need a <u>copy</u> of your driver's license and a <u>copy</u> of your social security card. If you cannot locate your Social Security card, you may submit a W-2 Form, or any document that contains your full Social Security number. Once this information is received and verified, a notice will be sent to you by mail to be filed with the Clerk of Courts Please carefully follow these instructions so that we may better serve you. Thank you for your patience and cooperation in this matter. If you have any further questions regarding this matter,

Collections Enforcement Paralegals Collections Enforcement 30 E. Broad St., 14th Floor Columbus, Ohio 43215

feel free to contact our office number listed below.

Office: 614-466-8360 Voicemail: 614-466-9393

AFFIDAVIT REGARDING MISTAKEN IDENTITY

[PLACE COPY OF DRIVER'S LICENSE HERE]

IN RE: DOCKET NO	PAGE NO
CASE/SERIAL NO	
CREDITOR:	

	DATE OF BIRTH
	SOCIAL SECURITY
CITY/STATE/ZIP (_	
, WHOSE CURRENT	CORRECT INFORMATION IS LISTED ABOVE,
HAVING BEEN FIRST DULY CAUTIONED AND SWORN AND	D UNDER PENALTY OF PERJURY FOR
PROVIDING ANY STATEMENT THAT I KNOW TO BE UNTI	RUE, DEPOSE AND STATE THAT I AM NOT THE
SAME PERSON AS THE	NAMED AS A DEFENDANT OR AS A JUDGMENT
DEBTOR IN THE ABOVE-CAPTIONED CASE AND/OR JUDG	EMENT AS RECORDED IN THE OFFICE OF THE
CLERK OF COURTS FORC	OUNTY, OHIO.
I FURTHER DISAVOW ANY KNOWLEDGE OF OR RESPONS	SIBILITY FOR THE ABOVE- CAPTIONED CASE
AND/OR JUDGMENT.	
AND FURTHER AFFIANT SAITH NOT.	
	SIGNATURE OF AFFIANT
SWORN TO AND SUBSCRIBED IN MY PRESENCE ON THE_	
CTATE OF OHIO	
STATE OF OHIO : SS	
COUNTY OF:	NOTA BY BUBLIC
	NOTARY PUBLIC
	MY COMMISSION EXPIRES: