

Jennifer S. Hunter CPA
Madison County Auditor

Affidavit of Successor Trustee
O.R.C. § 5302.171

I, _____, after being duly cautioned and sworn, state that:

(Print Name)

1. I am the Successor Trustee of the _____ Trust, which holds title to parcel number(s) _____ in _____ County, Ohio.

2. The Trustee who proceeded me, (Print Name of Prior Trustee) _____, no longer serves because of (check one):
___ death ; ___ resignation ; ___ or other reason,
as of _____, 20____. In case of death, attach death certificate.

3. The name and address of all trustees are as follows:

| Name | Street Address, City, State |
|-------|-----------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Further, affiant sayeth naught.

(Signature of Trustee) (Trust I.D. Number)
Sworn to and signed in my presence, this _____ day of _____, 20____

Notary Public

NOTE: This affidavit must be presented to the county auditor and filed with the county recorder within 30 days after the death, resignation, or other terminating event of the prior trustee.