OHIO DEPARTMENT OF PUBLIC SAFETY OHIO BUREAU OF MOTOR VEHICLES



AFFIDAVIT FOR DESIGNATION OF BENEFICIARY OR BENEFICIARIES BY THE SOLE OWNER FOR A MOTOR VEHICLE, WATERCRAFT OR OUTBOARD MOTOR CERTIFICATE OF TITLE. O.R.C. 2131.13(A)

I being first duly sworn, state as follows:			
l,	being the	e sole owner of the	vehicle, watercraft
or outboard motor described, Year	Make		
VIN / MIN	Title Number		
Do designate this vehicle, watercraft or outboard m			
BENEFICIARY FULL LEGAL NAME	SSN		DATE OF BIRTH
STREET ADDRESS	CITY	STATE	ZIP CODE
BENEFICIARY FULL LEGAL NAME	SSN		DATE OF BIRTH
STREET ADDRESS	CITY	STATE	ZIP CODE
BENEFICIARY FULL LEGAL NAME	SSN		DATE OF BIRTH
STREET ADDRESS	CITY	STATE	ZIP CODE
		-	,
Sworn to before me in the State of	and county of		
on this day of			
on this day or	20		_•
X APPLICANT / OWNER SIGNATURE			
X NOTARY / DEPUTY SIGNATURE	My Commi	ssion Expires on	