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AFFIDAVIT

STATE OF OHIO :

: SS

COUNTY OF _____ :

I, , _____ the _____ of
(name) *(title)*

the _____ Bar Association, being duly cautioned and sworn,
(state, city or county)

hereby state the following:

1. The expenses for which reimbursement is sought were incurred in the ordinary and usual business of the unauthorized practice of law committee of this bar association in the **Second Quarter of 2020**.

2. These submitted expenses have not been nor will they be reimbursed from any other source. The submitted expenses have not been previously reimbursed by the Board.

3. I have personal knowledge of the personnel costs that were specifically dedicated to the investigation and prosecution of unauthorized practice of law matters per Gov. Bar R. VII.

4. I have attached to this affidavit a reimbursement form setting forth the amount of personnel costs for the **Second Quarter of 2020**.

_____
Signature

_____
Name (please print or type)

Sworn to and subscribed before me this _____ day of _____, 2020.

_____
Notary Public

Print