



State of Ohio - Office of Budget & Management

**HANDWRITING SPECIMENS
CLAIM FOR ALLEGED FORGERY OF PAYEE(S) WARRANT**

CLAIMANT: _____ DATE PREPARED (m/d/yy): _____

STREET ADDRESS: _____ CITY: _____ ZIP CODE: _____

Sign Name

Sign Name

1) _____

7) _____

2) _____

8) _____

3) _____

9) _____

4) _____

10) _____

5) _____

11) _____

6) _____

12) _____

COPY THE FOLLOWING PARAGRAPH IN YOUR OWN CURSIVE HANDWRITING IN SPACE BELOW

“Our London business is good, but Vienna and Berlin are quite quiet. Mr. D. Lloyd has gone to Switzerland and I hope for good news. He will be there for a week, at 1496 Zermot St., and then goes to Turin and Rome, and will join Col. Parry, and arrive at Athens, Greece, Nov. 27th or Dec. 2nd. Letters there should be addressed: King James Blvd., 3580. We expect Chas. E. Fuller, Tuesday. Dr. L. McQuaid, and Robt. Unger, Esq. left on the ‘Y.X.’ Express tonight.”

NOTE: PLEASE USE THE HAND "NOT" USUALLY USED WHEN WRITING

Print Your Name

Sign Your Name

1) _____

6) _____

2) _____

7) _____

3) _____

8) _____

4) _____

9) _____

5) _____

10) _____

I HAVE GIVEN THIS SPECIMEN OF MY HANDWRITING OF MY OWN FREE WILL AND ACCORD. I HAVE BEEN PROMISED NOTHING NOR HAS ANY THREAT BEEN MADE AGAINST ME. I REALIZE THAT THIS MAY BE USED IN COURT AGAINST ME IN ANY PROSECUTION THAT MAY ARISE OUT OF THIS MATTER.

Signed: _____

Date: _____

NOTICE: PREPARATION OF HANDWRITING SPECIMENS MUST BE WITNESSED AND ATTESTED TO. CLAIMS WILL NOT BE PROCESSED WITHOUT SAME.

WITNESSED BY:

AGENCY OFFICIAL: _____

TITLE: _____

OR

SWORN TO BEFORE ME AND SUBSCRIBED BY THE SAID _____

IN MY PRESENCE THIS _____ **DAY OF** _____ **20** .

NOTARY PUBLIC

COMMISSION EXPIRES