

AGENT'S CERTIFICATION

The following optional form may be used by an agent to certify facts concerning a power of attorney.

AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY AND AGENT'S AUTHORITY

State of _____

County of _____

I, _____ (Name of Agent), certify under penalty of perjury that _____ (Name of Principal) granted me authority as an agent or successor agent in a power of attorney dated _____.

I further certify that to my knowledge:

- (1) the principal is alive and has not revoked the power of attorney or my authority to act under the power of attorney and the power of attorney and my authority to act under the power of attorney have not terminated;
- (2) if the power of attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency has occurred;
- (3) if I was named as a successor agent, the prior agent is no longer able or willing to serve; and
- (4) (Insert other relevant statements)

SIGNATURE AND ACKNOWLEDGMENT

Agent's Signature

Date

Agent's Name Printed

Agent's Address: _____

Agent's Telephone Number: _____

 Date Sign here ►

Typed or Printed Name of Principal _____

On this date, I certify that _____ (name)
 who is known to me or who presented satisfactory identification, in the form of
 _____ (form of identification), has, while in my
 presence and while under oath or affirmation, voluntarily signed this document and declared that it is true.

 Date Sign here ►

Typed or printed name (Notary Public) _____

Notary Seal

[This document prepared by: _____]