

**Agent's Certification as to the Validity of Power of Attorney and Agent's Authority**

State of \_\_\_\_\_

County/City 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 Acknowledgement**

Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Agent's Printed Name: \_\_\_\_\_

Agent's Social Security Number: \_\_\_\_\_ Agent's Date of Birth: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

Agent's Telephone Number: \_\_\_\_\_

This document was acknowledged before me on

by \_\_\_\_\_ (Name of Agent)

\_\_\_\_\_  
Signature of Notary (Seal, if any)

My commission Expires: \_\_\_\_\_

Notary Registration Number: \_\_\_\_\_