

AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I, _____ (insert name of agent), certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for _____ (insert name of principal).

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I accept appointment as agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.

Dated:

_____ (agent's signature)

_____ (print agent's name)

_____ (agent's address)

CO-AGENT'S

CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I certify that the attached is a true copy of a power of attorney naming the undersigned as agent or co-agent for _____
(insert name of principal).

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I certify that to the best of my knowledge _____
(insert name of unavailable agent) is unavailable due to _____
(specify death, resignation, absence, illness, or other temporary incapacity).

I certify that prompt action is required to accomplish the purposes of the power of attorney or to avoid irreparable injury to the principal's interests.

I accept appointment as agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.

Dated:

_____ (agent's signature)

_____ (print agent's name)

_____ (agent's address)

SUCCESSOR AGENT'S
CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for _____
(insert name of principal).

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I certify that to the best of my knowledge _____
(insert name of unavailable agent) is unavailable due to _____
(specify death, resignation, absence, illness, or other temporary incapacity).

I accept appointment as agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.

Dated:

_____ (agent's signature)

_____ (print agent's name)

_____ (agent's address)