

AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY
AND AGENT'S AUTHORITY
(Va. Code § 26-73.02)

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 ACKNOWLEDGMENT

Agent's Signature

Date

Agent's Name Printed

Agent's Address

Agent's Telephone Number

This document was acknowledged before me on _____(date) by
_____ (Name of Agent)

Signature of Notary (Seal, if any)

My commission expires: _____

Notary Registration Number: _____

This document prepared by:
