



Department of Commerce

Division of Unclaimed Funds
Sheryl Maxfield, Director

Mike DeWine, Governor
Jon Husted, Lt. Governor

Agent's Certification 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 _____, a copy of which is attached.

I further certify that to my knowledge:

- 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;
If the Power of Attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency has occurred;
If I was named as a successor agent, the prior agent is no longer able or willing to serve;
_____ (Insert other relevant statements)

Signature and Acknowledgment

Signature of Agent

Agent's Printed Name

Agent's Address:

Agent's Telephone Number:

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20_____.

NOTARY PUBLIC