



**IOWA STATUTORY POWER OF ATTORNEY  
AGENT'S CERTIFICATION FORM  
AGENT'S CERTIFICATION OF VALIDITY OF POWER OF ATTORNEY  
AND AGENT'S AUTHORITY**

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, certify under penalty of perjury that  
\_\_\_\_\_ granted me authority as an agent or  
successor agent in a power of attorney dated \_\_\_\_\_.

I further certify all of the following to my knowledge:

The principal is alive and has not revoked the power of attorney or 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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURE AND ACKNOWLEDGMENT**

\_\_\_\_\_  
Agent's Signature

\_\_\_\_\_  
Date

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

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

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

This record was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by  
\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

This document prepared by