

STATE OF ALABAMA

COUNTY OF SHELBY

**DELEGATION OF POWERS BY A PARENT OR GUARDIAN**

I, JOYCE A. CAVER  
EDDIE CAVER, JR, the MOTHER  
(custodial parent) (relationship)

of STACY M. CAVER a [ ☒ ] minor, [ ☐ ] incapacitated person, pursuant to Code of Alabama, 1975,  
Section 26-2A-7, do hereby delegate to EVA M. HAWKINS  
(person being given authority)

of P.O. Box 323, ALABASTER, AL 35007, authority to make decisions relating to the  
(address)

the physical custody, health, education, or maintenance of STACY M. CAVER  
(child)

or the property of STACY M. CAVER, including power to consent to medical treatment.  
(child)

This authority expires:

[ ☐ ] one year from the date of execution below

[ ☒ ] 30 NOVEMBER, 19 2003

unless revoked sooner.

I recognize that this delegation of authority does not relieve me of any primary responsibility that I  
may have for STACY M. CAVER.  
(child)

Dated: July 31, 19 2002 Joyce A. Caver  
(Signed - Custodial Parent/Legal Guardian)

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sworn to and subscribed before me on this the 31<sup>st</sup> day of July,  
19 2002

James A. Lutz  
Notary Public

My Commission Expires

MY COMMISSION EXPIRES SEPTEMBER 1, 2004

STATE OF ALABAMA

COUNTY OF SHELBY

ACCEPTANCE OF APPOINTMENT AS GUARDIAN

IN We, JEWELL HAWKINS, JR., and EVA M. HAWKINS  
(guardian) (guardian)

the undersigned, do hereby accept the appointment as GUARDIAN of the person and property of  
STACY M. CAVER, a minor, age 17, under that certain Delegation  
(child)

of Powers executed by EDDIE CAVER, JR. and  
(custodial parent)

JOYCE A. CAVER, dated this \_\_\_\_\_ day of \_\_\_\_\_,  
(custodial parent)

19\_\_\_\_.

We further represent that the residence of said minor is 635 5TH AVE SOUTHEAST,  
ALABASTER, AL, which is also our place of residence.

We further certify that we will, in our capacity as GUARDIANS, comply with and perform our duties in the  
best interest of the minor child, all in accordance with Ala. Code, 26-2A-7 (1975, as amended), and the Delegation of  
Powers hereinabove mentioned.

Dated: July 31, 2002

Eve Hawkins

(Signed - Guardian)

Address: P.O. Box 323  
ALABASTER, AL 35007

Sworn to and subscribed before me on this the 31st day of July,  
192002

James A. Ruda  
Notary Public

My Commission Expires:

MY COMMISSION EXPIRES SEPTEMBER 1, 2004

# Shelby County School District

## AFFIDAVIT

20020802000361480 Pg 3/3 17.00  
Shelby Cnty Judge of Probate, AL  
08/02/2002 10:38:00 FILED/CERTIFIED

### STATEMENT OF LEGAL RESIDENCE

STATE OF ALABAMA  
County of Shelby

Affiant, EVA M. HAWKINS, of lawful age, being first duly sworn on oath states that:

1. I affirm and declare that my permanent residence is: (635 5TH AVE SOUTHEAST) P.O. Box 323  
(Street Address)  
ALABASTER AL 35007  
(City) (State) (Zip)  
(205) 663-0447  
(Telephone Number)

This is my legal residence and is located within the established boundaries of the Shelby County School District. Specifically my residence is located within the THOMPSON HIGH SCHOOL attendance zone. As additional verification of residency, I have presented the original, and attached a copy of the following documents which contains my current street address.

(Check all that apply)

- ☐ Mortgage documents or property deed;  
☐ Apartment or home lease;  
☐ Current utility bills;  
☐ Written verification or personal visit by a designated school district official;  
☐ Other \_\_\_\_\_

2. I am the parent/legal guardian (circle one) of STACY M. CAVER  
(Child's Name)

- Attach guardianship document.  
3. The child listed above permanently resides in my home at the address mentioned in paragraph 1.  
4. I will immediately notify the school principal in writing should I change residence.  
5. I understand that a pupil admitted under false information is not legally enrolled and will be dismissed from school if not properly enrolled in accordance with the District's enrollment policy.

**UNDER THE PENALTY OF PERJURY I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND CORRECT.**

This, the 31st day of JULY, 1992002

Eva Hawkins

(Signature of Affiant)

PERSONALLY CAME AND APPEARED BEFORE ME, the undersigned authority in and for the county and state aforesaid, the Affiant listed above, who on oath states that the matters and facts contained in the above and foregoing statement of legal residence are true as therein set forth.

SWORN TO AND SUBSCRIBED BEFORE ME, this the 31st day of JULY, 1992002

MY COMMISSION EXPIRES SEPTEMBER 1, 2004

Commission Expiration

James A. Rutter  
NOTARY PUBLIC