

Affidavit
For
Delegation of Parental Authority
Ala. Code § 26-2A-7

My name is: Pamela J Folsom

My address is: 707-1 5th Caprington
Bentonville, AR 72712

My telephone is: 479-268-4355

The name of the student for whom I am delegating parental responsibility is as follows:

Name of student: Heather Ashton Wynn

Custodial Parent: I am the legal custodial parent of this student and I am authorized to execute this Delegation of Parental Authority and so indicate by my initials:

Yea, I am the legal custodial parent

Pamela J Folsom
(Initial or Sign)

Reasons for Delegation: Ala. Code § 26-2A-7 authorizes a custodial parent to delegate parental responsibility on a temporary basis where emergency or other compelling circumstances exist. A Delegation of Parental Authority is not appropriate to enable a student to zone jump from one school district to another.

Please explain in detail the emergency reasons or other compelling reasons why you are delegating rather than discharging your parental responsibilities:

Her Parents moved because of job
relocation. Heather wants to graduate
from Pelham High School. She has attended
Shelby County School's for 11 years.

(Use separate sheet if necessary)

Good Standing: Please state whether this student is in good standing (no outstanding disciplinary conditions) at the student's last school:

Yes, in good standing: P.F.
(Initial)

No, not in good standing: _____
(Initial)

Expected duration of this Delegation of Parental Authority:

From July 19, 2008 To: May 21, 2008

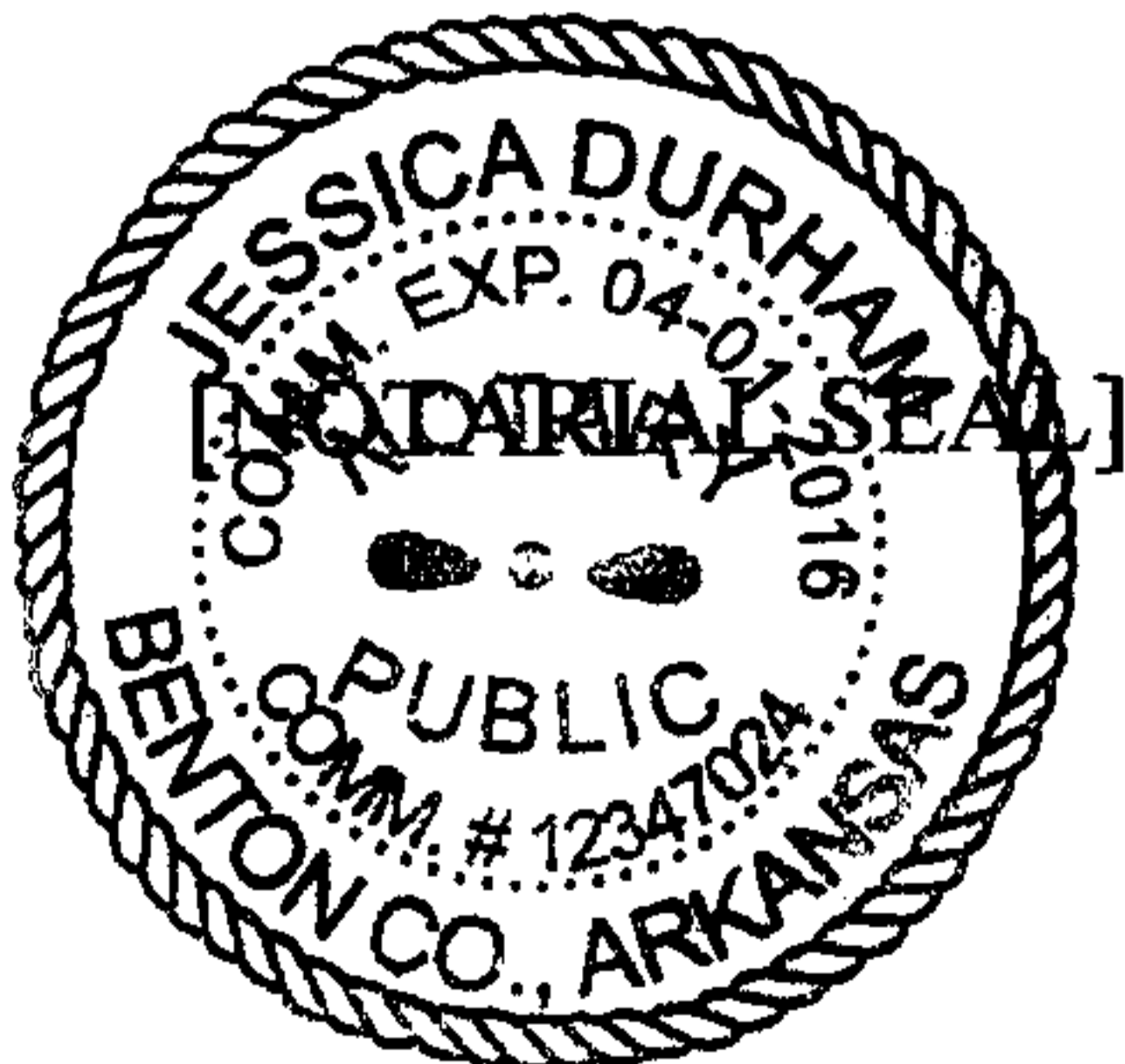
[Signature]
(Signature)

STATE OF ~~ALABAMA~~ Arkansas
Benton COUNTY)

I, the undersigned, a notary public in and for said county in said state, hereby certify that Pamela Folsom, whose name is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 22 day of July, 2008.

[Signature]
Notary Public



My commission expires: 04-01-16

ACCEPTANCE OF APPOINTMENT AS GUARDIAN

I/We, Terry White and Vanessa White,

the undersigned do hereby accept the appointment of Guardian of the person and property

of Heather Ashton Wynn, a minor, age 17, under that certain

Delegation of Powers executed by Pamela Tolson dated the

21 day of July, 2008. I/We further represent that the residence of

said minor is 1203 Chateau Circle Helena, AL 35080,

which is also my/our place of residence.

I/We further certify that I/we will, in my/our capacity as Guardian(s), comply with and perform my/our duties in the best interest of the minor child, all in accordance with Section 26-2A-7, Code of Alabama, 1988, and the Delegation of Powers hereinabove mentioned.

Terry White Terry White
Vanessa White Vanessa White

STATE OF ALABAMA)
SHELBY COUNTY)

I, the undersigned, a Notary Public in and for said County and State, do hereby certify that Terry White Vanessa White whose name is signed to the foregoing Delegation of Powers and who is known to me, acknowledged before me on this day that, being informed of the contents of said Delegation of Powers, she executed the same voluntarily on the day the same bears date.

Given under my hand and seal this the 21 day of
July, 2008

Roggy D Bullard

NOTARY PUBLIC

My Commission Expires: 4-26-11

(SEAL)