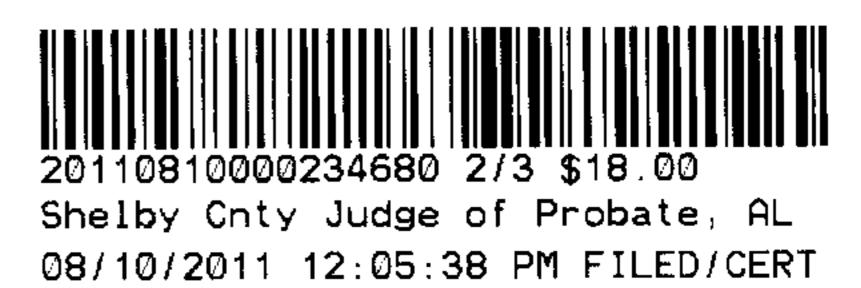
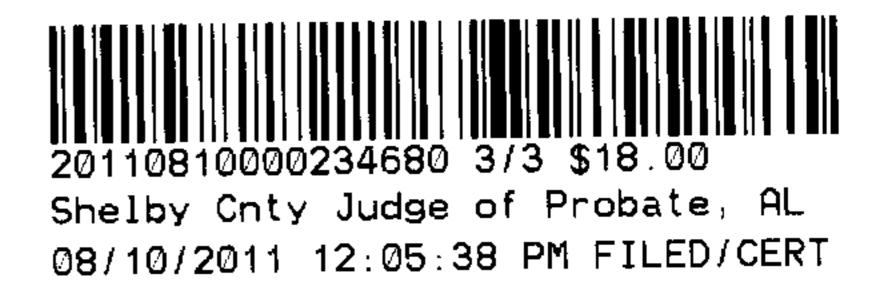


Affidavit for Delegation of Parental Authority Ala. Code § 26-2A-7

My name is: <u>Nativen Leigh Dauton</u>
My address is: 6009 wardy Circle
Birminghom, AL 35313
My telephone is:
The name of the student for whom I am delegating parental responsibility is as follows:
Name of student: Michael Cole Evans
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 (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:
Michael Cole Erons is residing under a DHR Sofety Plan with Regina MEG boney, a Family
Friend. He needs to be enrolled in school in the area he is currently residing until the
conclusion of the Safety Plan.
(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: (Initial)
(Initial)
No, not in good standing: (Initial)
Expected duration of this Delegation of Parental Authority:
From: August 10, 2011 To: December 31, 2011
Loven Legh Baccom (Signature)
STATE OF ALABAMA)
5/1 e/by county)
I, the undersigned, a notary public in and for said county in said state, hereby certify that <u>Laren Leigh Bail Com</u> , 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 Hot day of <u>Rugust</u> , <u>2011</u>
Notary Public (
[NOTARIAL SEAL] My commission expires: April M. Lawley MY COMMISSION EXPIRES OCTOBER 1, 2014



(NOTARIAL SEAL)

ACCEPTANCE OF APPOINTMENT AS GUARDIAN

Me, Regina ME Gibboney and Shawn Conti
the undersigned do hereby accept the appointment of Guardian of the person and property of
Michael Cole Evans a minor, age under that certain
Delegation of Powers executed by <u>Lauren L. Evans Baucom</u> dated the
10 day of August
of said minor is 13995 Highway 73, #13, Mondovallo, AL 35115
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 said child, all in accordance with Section 26-2A-7, Code of Alabama, 1988, and the Delegation of Powers hereinabove mentioned.
Regina Mª Siboney Main Cont
STATE OF ALABAMA)
SHELBY COUNTY)
I, the undersigned, a Notary Public for said County and State, do hereby certify that Reginal Legisland County 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, he executed the same voluntarily on the day the same bears date.
Given under my hand and seal this the 10 day of august
april m. Lamber
April M. Lawley MY COMMISSION EXPIRES NOTARY PUBLIC
My Commission Expires: OCTOBER 1, 2014