



20140805000242920 1/3 \$20.00
Shelby Cnty Judge of Probate, AL
08/05/2014 01:31:04 PM FILED/CERT

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

My name is: Jessie Kimberly Smith

My address is: 90 First Street East

My telephone is: 2

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

Name of student: GAVIN BRENT CAGLE

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:

I'm in jail

(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: *fb*
(Initial)



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No, not in good standing: _____
(Initial)

Expected duration of this Delegation of Parental Authority:

From: August 1, 2014 To: May 21, 2015 *by*

(Signature)

STATE OF ALABAMA)
:)
TALLADEGA COUNTY)

I, the undersigned, a notary public in and for said county in said state, hereby certify that Terrie Kimberly Smith, 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 22nd day of
July, 2014.

Notary Public

[NOTARIAL SEAL]

My Commission Expires
My commission expires: 4-3-2016



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ACCEPTANCE OF APPOINTMENT AS GUARDIAN

I/We, Johnnie Sue Thomas and _____,

the undersigned do hereby accept the appointment of Guardian of the person and property
of Gavin Brent Cagle, a minor, age 5, under that certain

Delegation of Powers executed by Terry Kimberly Smith dated the

22nd day of July, 2014. I/We further represent that the residence of
said minor is 901 5th St. East Calera, AL 35040,

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.

STATE OF ALABAMA)
SHELBY COUNTY)

I, the undersigned, a Notary Public for said County and State, do hereby certify
that Johnnie Sue Thomas, 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 22nd day of
July, 2014.

NOTARY PUBLIC

My Commission Expires
4-3-2016

My Commission Expires: _____

(SEAL)