


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


20170802000277360 1/3 \$21.00
Shelby Cnty Judge of Probate, AL
08/02/2017 09:20:22 AM FILED/CERT

My name is: Timothy W. Strickland

My address is: 114 Mooney Rd.
Columbia, Ala. 35051

My telephone is: [REDACTED]

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

Name of student: Ashlyn Strickland

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 T.W.S.
(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:

Father, working out of town.

(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: _____

JB
(Initial)

No, not in good standing: _____

(Initial)



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Expected duration of this Delegation of Parental Authority:

From: _____

8/2/17

To: _____

6/1/18

JB

Tim Strickland

(Signature)

STATE OF ALABAMA)

Shelby COUNTY)

I, the undersigned, a notary public in and for said county in said state, hereby certify that Tim Strickland, 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 2nd day of August, 2017

Susan H. Goodwin

Notary Public



My commission expires: 5-5-20



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ACCEPTANCE OF APPOINTMENT AS GUARDIAN

I/We, Janice and Keith Durkee

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

of Ashlyn Strickland, a minor, age 10, under that certain

Delegation of Powers executed by Jana Strickland dated the

2 day of August 2017. I/We further represent that the residence of

said minor is 4860 Highway 47 Shelby AL 35143

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.

Keith Durkee

Janice Durkee

STATE OF ALABAMA)
SHELBY COUNTY)

I, the undersigned, a Notary Public for said County and State, do hereby certify that Janice and Keith Durkee 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 2nd day of August, 2017

Susan H. Goodwin

NOTARY PUBLIC

My Commission Expires: 5-5-20

(SEAL)

