

Attorney Proof of Entitlement

Addendum to application for certified copy of an Iowa vital event by an attorney on behalf of a client.

This completed and notarized Proof of Entitlement must accompany each request for a certified copy of an Iowa vital event by applicants alleging to be the registrant's or the registrant's immediate family's attorney at law.

Type of Event:	Date of Event:
<input type="text"/>	<input type="text"/>

Name of person granting representation rights (client):	Name of person named on the record (registrant):
<input type="text"/>	<input type="text"/>

Name of attorney legally representing the registrant and/or the registrant's immediate family:
<input type="text"/>

Purpose of representation:	Date representation began:	Client agreement signed:
<input type="text"/>	<input type="text"/>	(Circle One) Yes No

CLIENT'S CERTIFICATION ACKNOWLEDGEMENT:

I affirm that I have given the attorney named above entitlement to obtain a certified copy of an Iowa vital event that I need to determine or protect my personal or property interest. I have signed below in front of a Notary Public.

SIGNATURE _____ DATE SIGNED _____

State of _____ County of _____ ss _____ Name as appears on identification on this _____ day of _____, _____. _____, My commission expires: _____ Notary Public Signature	(SEAL)	Documentation used for Notarization (indicate below)
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ATTORNEY'S CERTIFICATION ACKNOWLEDGEMENT:

I affirm that I represent the client named above for legal purposes and the certified copy is needed to determine or protect the client's personal or property interest. I have signed below in front of a Notary Public.

SIGNATURE _____ DATE SIGNED _____

State of _____ County of _____ ss _____ Name as appears on identification on this _____ day of _____, _____. _____, My commission expires: _____ Notary Public Signature	(SEAL)	Documentation used for Notarization (indicate below)
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Include a photocopy of the attorney's identification that was used for notarization.