

IN THE CHANCERY COURT OF MADISON COUNTY, MISSISSIPPI

IN THE MATTER OF THE:

_____ CAUSE NO. _____

CERTIFICATE OF ATTORNEY

I, _____, attorney for fiduciary _____,
in this cause, do certify as an officer of this Court and member in good standing with the
Mississippi State Bar Association, that I have fully and thoroughly explained the duties and
obligations required of my client(s) as fiduciary in this action.

Respectfully Submitted,

Signature of Attorney: _____

_____ Printed Name of Attorney: _____

Bar No.: _____