Power of Attorney Certification Form

Shelton Capital Management requires this form to be completed by the Attorney-in-Fact (AIF) under the Power of Attorney and submitted along with a full and complete copy of the Power of Attorney as well as any applicable riders or addendums. Any event or contingency documentation required by the Power of Attorney must also be submitted.

ACCOUNT HOLDER INFORMATION			
ATTORNEY-IN-FACT			
ATTORNEY-IN-FACT AFFIDAVIT			
Note: Shelton Capital Management requ	uires this section to be	completed prior to processing any transaction s	ubmitted by the AIF.
I,		, being duly	sworn, depose and state that:
a. The principal validly executed, in a	accordance with state la	w, a power of attorney ("POA") dated	, appointing
me as his/her Attorney-in-Fact. Attached to this affidavit is a true and complete copy of the POA.			
b. This POA is now in full force and effect. The Principal is now living and I have received no notice that the Principal has revoked or suspended			
this POA.			
c. If the POA was drafted to become effective upon the happening of an event or contingency, that event or contingency has occurred. Any			
proof of the event or contingency required by the POA is attached.			
d. If the POA has an expiration date, I acknowledge that the powers granted will expire as per the date referenced in the POA.			
e. I make this affidavit for the purpose of inducing Shelton Capital Management to accept delivery of the attached instrument(s) as executed			
by me in my capacity as Attorney-in-Fact of the Principal, with full knowledge that this affidavit will be relied upon by Shelton Capital Management in accepting the instrument(s) affecting Shelton Capital Management Account Number(s) provided in Account Holder Section			
of this form.			
SIGNATURES			
By signing this form you are agreeing to of the person guaranteeing your signat		nt stated above as Power of Attorney. This form n	nust be signed in the presence
or the person guaranteeing your signat	are and submitted via i		
Attornov in Fact's Signature	Data		
Attorney-in-Fact's Signature	Date		
		Please mail completed form to:	
Shelton Funds Attn: Mailroom			
		4221 N. 203rd St. Ste 100 Elkhorn, NE 68022	
		•	
Medallion Signature Guarantee Stamp			

A signature guarantee assures a signature is genuine and protects you from unauthorized requests on your account.