

REVOCATION OF POWER OF ATTORNEY

I, _____, of _____,
hereby revoke the Power of Attorney dated _____, under which
_____ was appointed to act on my behalf.

Dated _____ at _____.

(name)
(signature)

STATE OF _____,
COUNTY OF _____

On _____ before me, _____, personally
appeared _____,
_____ and _____,
who proved to me on the basis of satisfactory evidence to be the person whose name is
subscribed to the within instrument and acknowledged to me that he/she executed the same in
his/her authorized capacity, and that by his/her signature on the instrument the person, or the
entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____
that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature of Notary Public (Notary Seal)

Copy delivered to:
Agent: _____
Address: _____
