POWER OF ATTORNEY REVOCATION

I, ____________________________, having the authorization to grant and revoke the power of general attorney, do hereby revoke, annul, cancel and nullify, in its entirety, the power of attorney bestowed to ____________________________ on _____________ day of _____________, in the county _____________ of _____________ in the state of _____________.

Name of Grantor: ________________  
Signatur e: ________________

Revocation of Power of Attorney executed this day, the _____________ of _____________ 20 _____________

In the State of: ____________________________

County of: ____________________________
On the day of 20__

__________________________

Notary personally appeared, _________________________________________________,
known by me personally or proven, under oath or signature, to be the person who
is subscribed, by name, to the instrument in question, and that she/he/they
executed the instrument within her/his/their authorized capacity(ies) either on their behalf or
upon the behalf of the person who authorized the transaction.

I attest, under the penalty of perjury within the state of ____________________________,
that the above statement is completely factual and true.

Witness by my hand and official seal:

__________________________

Signature

Affiant [ ] Known  [ ] Unknown

ID Produced

__________________________