

## Notice of Revocation of Power of Attorney

I, \_\_\_\_\_ [your name], of \_\_\_\_\_ [your city and state], revoke the power of attorney dated \_\_\_\_\_, empowering \_\_\_\_\_ [name of your attorney-in-fact] to act as my attorney-in-fact. I revoke and withdraw all power and authority granted under that power of attorney.

[if applicable:] That power of attorney was recorded on \_\_\_\_\_ in Book \_\_\_\_\_, at Page \_\_\_\_\_, of the Official Records, County of \_\_\_\_\_, State of \_\_\_\_\_.

Signed: This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

State of: \_\_\_\_\_ County of: \_\_\_\_\_

Signature: \_\_\_\_\_, Principal

Social Security number: \_\_\_\_\_

### Certificate of Acknowledgment of Notary Public

State of \_\_\_\_\_ )

) ss

County of \_\_\_\_\_ )

On \_\_\_\_\_, before me, \_\_\_\_\_, a notary public in and for said state, personally appeared \_\_\_\_\_, personally known to me (or 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 or she executed the same in his or her authorized capacity and that by his or her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_

My commission expires \_\_\_\_\_

[NOTARY SEAL]