REVOCATION OF POWER OF ATTORNEY

Reference is made to that of	ertain power	of atto	orney granted by	·	
(Grantor) to					(Attorney-in-Fact), and dated
	, 20	_ and	recorded in Bo	ok	Page
This document acknowled terminates said power-of-at					nereby revokes, rescinds and offective this date.
Signed under seal this			_day of		, 20
[Signature of Grantor]			_	Witness	
Printed or Typed Name of	Grantor]		_	Witness	
<u>CERTIFIC</u>	CATE OF AC	CKNC	OWLEDGMEN	T OF NOTA	RY PUBLIC
State of					
County of					
On	_ before me	,			personally
satisfactory evidence to instrument and acknowl	be the per edged to mand that by	rson(s ne tha his/ha	s) whose nam at he/she/they er/their signatu	ne(s) is/are executed re(s) on the	oved to me on the basis of subscribed to the within the same in his/her/their instrument the person(s), instrument.
I certify under PENALTY that the foregoing paragraph				f the State	of
WITNESS my hand and	official seal.				
			(S	eal)	
Signature					