

Revocation of Power of Attorney

I swear that the following is true:

- (1) On _____ (date), I signed a written power of attorney appointing _____ (name) the attorney-in-fact for _____ (name), delegating my powers as parent or guardian.

- (2) I revoke that power of attorney and assume full rights and responsibilities of a parent or guardian.

Date _____ Sign here ► _____
Typed or printed name _____

I certify that _____, who is known to me or who presented satisfactory identification, has, while in my presence and while under oath or affirmation, voluntarily signed this document and declared that it is true.

Date: _____ Sign here ► _____
Typed or printed name _____
Notary Seal