

MTSi

License & Permitting Agency
301 W. Michigan POB 206
Stuttgart, AR 72160
Phone: (870) 672- 7469 Fax: (870) 672- 9760

REVOCATION OF LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that I, _____

Individually and on behalf of _____

("Company") as Grantor, do hereby revoke any and all powers granted by

a Limited Power of Attorney dated _____ to

Signed

Date

Name, Position (Please print) _____

COMPANY (Please print) _____