REVOCATION OF POWER OF ATTORNEY

I,			, Declarant,
			y on the day of
	, 20, nar	ming	
		_ my attorney-in-fac	t/agent, do hereby revoke that
			y be revoked by me by written
instrument signed	d by me and delivered to m	y attorney-in-fact/Age	ent.
•	en revocation of the above opy of it to my attorney-in-		Durable Power of Attorney and I
Signed this	day of		, 20
		(Principal's Signatur	re)

(Principal's Social Security Number)

The principal is personally known to me and I believe the principal to be of sound mind. I am eighteen (18) years of age or older. I am not related to the principal by blood or marriage, or related to the attorney-in-fact by blood or marriage. The principal has declared to me that this instrument is his revocation of a power of attorney granting to a named attorney-in-fact the power and authority specified therein, and that he has willingly made and executed it as his free and voluntary act for the purposes herein expressed.

Witness:

Witness:

STATE OF NORTH DAKOTA

COUNTY OF _____

The	foregoing	instrument	was	acknowledged	before	me	this	the		day	of
			, 2	0 by							
(name of person acknowledging).								g).			

(Signature of person taking acknowledgment)

(Title or rank)

(Serial number, if any)