## REVOCATION POWER OF ATTORNEY: CARE AND CUSTODY OF CHILD OR CHILDREN

Ι,	
	rney: Care and Custody of Child or Children on the
day of	
	my
	t Power of Attorney pursuant to its provision that it
may be revoked by me in writing.	
This is my written revocation of the above	referenced Power of Attorney and I am providing a
copy of it to my attorney-in-fact/Agent.	
DATED this the day of	
Signature of Declarant:	
Printed Name of Declarant:	
Address of Declarant:	
ATTESTATI	ON OF WITNESSES
The individual who has executed this revoc	cation of power of attorney appears to be of sound
mind, and under no duress, fraud, or undue is	nfluence.
	(Witness signature)
	(Type or print witness's name)

(Witness signature)	
(Type or print witness's name)	
(Date)	