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

I,	,
Declarant, having executed a Power of Attorney	: Care and Custody of Child or Children on the
day of	, 20, naming
	my
attorney-in-fact/agent, do hereby revoke that Po	wer of Attorney pursuant to its provision that it
may be revoked by me in writing.	
This is my written revocation of the above refer	enced Power of Attorney and I am providing a
copy of it to my attorney-in-fact/Agent.	
Dated:	, 20
Signature:	(Seal)
STATE OF	
COUNTY OF	
On this day of	, 20, personally
appeared before me, the said named	
	to me
known and known to me to be the person of	lescribed in and who executed the foregoing
instrument and he (or she) acknowledged that	he (or she) executed the same and being duly
sworn by me, made oath that the statements in th	e foregoing instrument are true.

(Signature of Notary Public)

My Commission Expires: _____

Notary Public (Official Seal)