

REVOCATION OF POWER OF ATTORNEY

I, _____, Declarant, having executed a Statutory Power of Attorney on the ____ day of _____, 20____, naming _____ my attorney-in-fact/agent, do hereby revoke that Power of Attorney pursuant to its explicit provision that it may be revoked by me by written instrument signed by me and delivered to my attorney-in-fact/Agent.

This is my written revocation of the above referenced Statutory Power of Attorney and I am providing a copy of it to my attorney-in-fact/Agent.

DATED this the ____ day of _____, 20_____.

Signature

City, County, and State of Residence

STATE OF NEW HAMPSHIRE
COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____.

Notary Public/Justice of the Peace

My Commission Expires: _____