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 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 | , 20 |
|----------------|--------|------|
|----------------|--------|------|

(Signature)

(Optional, but preferred: Your social security number)

Dated:_____, 20_____

COUNTY OF _____, STATE OF NEW MEXICO

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

My Commission Expires: _____

Notary Public