

**REVOCATION OF
STATUTORY 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 provision that it may be revoked by me at any time.

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_____.

Your Signature:

Your Social Security Number:

State of _____

(County) of _____

This document was acknowledged before me on _____ (Date)
by _____ (Name of principal)

(Signature of notarial officer)

(Seal, if any) _____

(Title and Rank) _____

My commission expires: _____

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES
THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.