

RECORDING REQUESTED BY

WHEN RECORDED MAIL TO

NAME

ADDRESS

CITY

STATE&ZIP

Title Order No.

Escrow No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

REVOCATION OF POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the Power of Attorney executed by
on:

and recorded in Book _____, Page _____, Instrument No. _____
of County, _____ State of _____ by _____
which _____ constituted _____

Attorney for the purpose in said Power of Attorney set forth, is hereby wholly revoked, canceled and annulled.

IN WITNESS WHEREOF, _____ has _____ hereunto set _____ hand _____ and seal
on:

Signed, Sealed and Delivered in Presence of _____ (SEAL)
_____ } _____ (SEAL)
_____ } _____ (SEAL)

STATE OF CALIFORNIA
COUNTY OF _____

On _____ before me,
_____, Notary
Public, personally appeared _____

who proved to me on the basis of satisfactory evidence
to be the person(s) whose name(s) is/are subscribed to the
within instrument and acknowledged to me that he/she/they
executed the same in his/her/their authorized capacity(ies),
and that by his/her/their signature(s) on the instrument the
person(s), or the entity upon behalf of which the person(s)
acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

Signature _____

Title Order No. _____ Escrow or Loan No. _____