

KANSAS POWER OF ATTORNEY REVOCATION FORM

Any power of attorney made by _____ (Referred to as the "Principal")
that was previously made is hereby REVOKED.

Including but not limited to the form signed on _____ with the Principal's
agent being _____.

EXECUTION

Executed this _____, at _____, Kansas.
_____ Principal.

This document must be: (1) Witnessed by two individuals of lawful age who are not the
agent, not related to the principal by blood, marriage or adoption, not entitled to any portion of
principal's estate and not financially responsible for principal's health care; OR (2) acknowledged
by a notary public.

Witness Witness

Address Address

(OR)
STATE OF _____)
 SS.
COUNTY OF _____)

This instrument was acknowledged before me on _____ by _____.

_____ (Signature of notary public)

(Seal, if any)

My appointment expires: _____