

**REVOCATION OF POWER OF ATTORNEY
(MICHIGAN)**

Reference is hereby made to that certain power of attorney granted by _____, *[insert your full name]* the Principal, to _____, *[insert full name of attorney]* the Attorney-in-Fact, and dated the ____ day of _____, _____.

This document constitutes notice that the Principal hereby revokes, rescinds and terminates the said power of attorney and all authority, rights and power thereunder.

DATED at _____, State of Michigan this ____ day of _____, _____.

Signature of Principal

Acknowledgment

State of Michigan)
County of _____)

Before me, a notary public in and for said County and State, personally appeared the above-named who acknowledged that he/she did sign the foregoing instrument and that the same is his/her free and voluntary act and deed.

Notary Public
My Commission expires: _____

(SEAL)