

# REVOCATION OF POWER OF ATTORNEY

I, \_\_\_\_\_, hereby revoke all powers of attorney granted to \_\_\_\_\_ on \_\_\_\_\_ (date).

This is a full revocation and is effective immediately.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

Signature

STATE OF MONTANA    )  
  : ss  
COUNTY OF \_\_\_\_\_ )

Subscribed, acknowledged, and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

(Signature of Notary)

\_\_\_\_\_

(Printed Name)

(Notarial Seal)

\_\_\_\_\_  
NOTARY PUBLIC FOR THE STATE OF MONTANA  
Residing at:  
\_\_\_\_\_  
My Commission Expires:  
\_\_\_\_\_