

REVOCATION OF POWER OF ATTORNEY

Whereas, I, _____ in and by Letter of Attorney, bearing the date _____, recorded in Schoharie County Clerk's Office on ____/____/____ in Book _____ at Page _____ and he / she did make, constitute and appoint _____

as by the aforesaid Letter of Attorney may fully and at large appear.

Now Know Ye, that I, the aforesaid _____ of
(Principal)

City / Town of _____, County of _____ State of New York,

hereby give notice that I have revoked, countermanded, annulled and made void, and by these presents

does hereby revoke, countermand, annul and make void the Power of Attorney dated ____/____/____

given to the said _____.
(Agent)

In Witness Whereof, he / she has unto set his / her hand and seal the _____ day of _____,
20____

Principal Signature

STATE OF NEW YORK

ss:

COUNTY OF SCHOHARIE

On this _____ day of _____, in the year _____, personally appeared _____ to me personally known to me or proved to me on the basis of satisfactory evidence to be the same individual(s) whose name is / are subscribed to the within instrument and acknowledged to me that he / she / they executed the same in his/her/their capacity(ies), that by his/her/their signature(s) on the instrument, the individual(s) or person(s) upon behalf of which the individual(s) acted, executed the instrument.

Notary Public