MAINE REVOCATION OF POWER OF ATTORNEY

I,	(name), currently residing at			
		(address)	, hereby revoke	
the power of attorney dated		, 20 (insert date))	
OR				
all powers of attorney executed by me	prior to the date	of execution of this Re	evocation of Power	
of Attorney.				
IN WITNESS WHEREOF, I have set 1	my hand this	day of	, 20	
(signature)				
(printed name)				



ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF MAINE)		
COUNTY OF) ss)	
On	before me	e,
		(insert name and title of the officer)
personally appeared		, who proved to me on the
basis of satisfactory evidence	ce to be the person	, who proved to me on the (s) whose name(s) is/are subscribed to the within
		ne/they executed the same in his/her/their
authorized capacity(ies), and	d that by his/her/th	neir signature(s) on the instrument the person(s), or
the entity upon behalf of wh	nich the person(s)	acted, executed the instrument.
I certify under PENALTY (foregoing paragraph is true		ler the laws of the State of Maine that the
WITNESS my hand and off	ficial seal.	
Signature		(seal)
Digitatuic		(scar)



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If you want to learn more about Revocation of Power of Attorney, read more in our general

category Revocation of Power of Attorney Template.

Click the following link to find out more details about Maine Power of Attorney Forms.

