

Date: [Date]

To: [Name of Bank/Financial Institution]

Branch Address: [Street Address, City, State, Zip Code]

RE: REVOCATION OF LIMITED POWER OF ATTORNEY

Account Holder Name: [Your Full Name]

Account Number(s): [List Account Number(s)]

To Whom It May Concern,

I, [Your Full Name], hereby immediately revoke, terminate, and cancel the Limited Power of Attorney previously granted by me to:

Agent/Attorney-in-Fact Name: [Name of Agent]

Date Power of Attorney was Signed: [Date original POA was executed]

Effective immediately, the aforementioned individual no longer has the authority to act on my behalf, access my accounts, or perform any financial transactions regarding the accounts listed above.

Please update your records accordingly. Any prior authorization or signature cards associated with this Limited Power of Attorney should be considered void.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Phone Number]

[Your Address]

NOTARY ACKNOWLEDGMENT

State of _____

County of _____

On this day, before me personally appeared [Your Name], proved to me through satisfactory evidence of identification to be the person whose name is signed on this document, and acknowledged to me that they signed it voluntarily for its stated purpose.

Notary Public Signature

My Commission Expires: _____

(Seal)