

**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: \_\_\_\_\_