## **NEW JERSEY REVOCATION OF POWER OF ATTORNEY** In Accordance with NJ Revised Statute § 46:2B-8.10

l, (y	our name), of	(your town), New Jersey,
hereby revoke any and all Powe	rs of Attorney and all a	authority to act as my Agent given to
	(Agent's nar	ne). From this date forward, my former Agent
has no authority to handle my p	personal or financial af	fairs. Under NJ § 46:2B-8.10, my former Agent
must comply with this revocation	. This document serve	es as notice of the revocation to the Agent and
to all parties that receive it. A ph	otocopy has the same	effect as the original.
The foregoing Revocation was s	igned by	in our presence, and we,
at her request and in her presen	ce, and in the presenc	e of each other, each of us being over the age
of 18 years, have hereunto subs	cribed our names as V	Vitnesses on this the day of
, 20		
Witness		Witness
Street Address		Street Address
City, State, and ZIP		City, State, and ZIP
STATE OF NEW JERSEY		
COUNTY OF		
BEFORE ME, the undersigned at	uthority, on this day pe	ersonally appeared
•		ving been duly sworn, states that she is executing
		s shown above and for the purposes therein
expressed.		
SWORN TO, SUBSCRIBED AND	ACKNOWLEDGED	BEFORE ME by and by the
		, on this day o
, 20		

Notary Public, State of \_\_\_\_\_