

(Top 3 inches reserved for recording data)

**REVOCATION OF POWER OF ATTORNEY**  
**Minn. Stat. 523.11, subd. 2**

**Minnesota Uniform Conveyancing Blanks**  
**Form 100.1.2 (2011)**

DATE: \_\_\_\_\_  
*(month/day/year)*

The undersigned hereby revokes the Power of Attorney dated \_\_\_\_\_, from \_\_\_\_\_,  
*(month/day/year)*  
\_\_\_\_\_ as Grantor and  
Principal, to \_\_\_\_\_, as Attorney-in-Fact,  
relating to real property in \_\_\_\_\_ County, Minnesota, legally described as follows:

Check here if all or part of the described real property is Registered (Torrens)

If filed for record, the Power of Attorney was filed \_\_\_\_\_, as Document Number \_\_\_\_\_  
*(month/day/year)*  
(or in Book \_\_\_\_\_ of \_\_\_\_\_ Page \_\_\_\_\_), in the Office of the  County Recorder  Registrar of Titles of  
*(check the applicable boxes)*  
\_\_\_\_\_ County, Minnesota. If filed with the Registrar of Titles, insert the number of the Certificate of Title:  
\_\_\_\_\_.

\_\_\_\_\_  
*(signature)*

**NOTE: This instrument should be recorded in the office of the County Recorder or the Registrar of Titles in the County where the real property is situated. See Minn. Stat. 523.11, subd. 2**

State of Minnesota, County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_, by \_\_\_\_\_  
*(month/day/year)*

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(Stamp)

\_\_\_\_\_  
*(signature of notarial officer)*

Title (and Rank): \_\_\_\_\_

My commission expires: \_\_\_\_\_  
*(month/day/year)*

THIS INSTRUMENT WAS DRAFTED BY:  
*(insert name and address)*