



KAREN ELLISON, RECORDER

APN# _____

Recording Requested by/Mail to:

Name: Roger Grau

Address: 2930 Hot Springs Rd.

City/State/Zip: Minden, NV 89423

Mail Tax Statements to:

Name: _____

Address: _____

City/State/Zip: _____

Revocation of Power of Attorney

Title of Document (required)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

Signature

Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

REVOCATION OF POWER OF ATTORNEY

I, Vanita Jane Grau, hereby revoke, cancel and make void all durable powers of attorney naming me as principal executed prior to 10/6, 2015 specifically excluding any health care powers of attorney and advance health care directives. Nothing herein shall affect any action taken by my attorney-in-fact prior to receiving this notice. This notice shall be conclusive for all purposes, from the date of execution as set forth below.

This Revocation of Power of Attorney may be served via personal delivery, mail, facsimile transmission or other electronic transmission, and shall be effective regardless of the manner in which same is received. A copy of this Revocation of Power of Attorney shall be effective as an original for all purposes.

Vanita Jane Grau Date: 10/6, 2015

Signature of Vanita Jane Grau
2930 Hot Springs Road
Minden, Nevada 89423

**ACKNOWLEDGMENT
OF NOTARY PUBLIC**

State of Nevada
County of DOUGLAS

On this 6th day of OCTOBER, 2015, before me, the undersigned Notary Public, personally appeared Vanita Jane Grau, personally known to me (or proved to me on the basis of satisfactory evidence) to be the individual who signed the foregoing Revocation of Power of Attorney and acknowledged to me that he or she executed the same in his or her authorized capacity, and that by such signature, the person executed the instrument.

Witness my hand and seal.

Signature of Notary Public: Anthony L. Vickers

