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How to Complete an Arizona Revocation of Power of Attorney

Revocation of Power of Attorney • A.R.S. § 14-5504

INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT RECORD THIS PAGE.

About this form. Use this form to cancel a financial power of attorney you signed earlier. It is formatted so it can be recorded if the original power of attorney was recorded with the County Recorder.

1. **Fill in the recording box if you will record it**
   Top left of Page 1. Leave the rest of the top 2 inches blank.
2. **Identify what you are revoking**
   One power of attorney, or all financial powers of attorney.
3. **List who must be told**
   A bank that has not been told may still rely on the old power of attorney.
4. **Sign before a notary**
   You must have capacity when you sign. Bring a current photo ID.

Signing requirements: Signed by the principal before a notary.

After It's Signed

- Record it in the same county if the original was recorded, and ask your bank to note the revocation.
- If you want a new agent, sign a new power of attorney.

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Have questions about your Revocation? To consult with an attorney, contact **Gavrilov & Brooks Law Firm** at **(916) 504-0529** or **www.gavrilovlaw.com**.

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Recording requested by and when recorded return to:

Space above this line reserved for the County Recorder

REVOCATION OF POWER OF ATTORNEY

State of Arizona • A.R.S. § 14-5504

Principal name

Principal address

I, the principal named above, being of sound mind, revoke (check one):

☐ The power of attorney described below:

Date of power of attorney

Agent(s) named in it

If recorded:

County recorded

Recording / instrument number

Date recorded

☐ All financial powers of attorney I have previously signed, except health care and mental health care powers of attorney.

All authority granted under the revoked power(s) of attorney is terminated. I direct the agent(s) to stop acting for me immediately and to return to me all of my property, records and documents, together with an accounting of all transactions made on my behalf.

I understand that a person who relies in good faith on the power of attorney without actual knowledge of this revocation may be protected. I will deliver copies of this revocation to:

Agent(s), banks and other persons to be notified

X

Principal signature

Date

Principal printed name

ACKNOWLEDGMENT

STATE OF ARIZONA

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ (name(s) of person(s) acknowledging).

X _____

Signature of Notary Public

Notary Public (printed name)

My commission expires

Commission number

(Notary seal)

PROOF OF DELIVERY TO AGENT (optional)

Delivered to (agent name)

Method (hand, certified mail, etc.)

Date

X _____

Signature of person delivering