

**Revocation of Attorney/Domestic Representative and/or Appointment of
Attorney/Domestic Representative**

Handwritten Signature

Signature Section: 
Signature: _____

Date: October 6, 2015

Signatory's Name: H. Timothy Lopez

Signatory's Position: Secretary

Signatory's Phone Number: 616-654-3082

NOTE TO APPLICANT: When filed as part of the electronic form (i.e., scanned and attached as an image file), include only the signature page (no declaration is required, nor should any other information from the actual revocation be included).

[Back](#)