

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

Handwritten Signature

Signature Section:

Signature:  _____

Date: 19 APR 2017

Signatory's Name: Mark Paul Lehman

Signatory's Position: Vice President and Assistant Secretary

Signatory's Phone Number: 301.323.9000

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](#)