Revocation, Appointment, and/or Change of Address of Attorney/Domestic Representative

Handwritten Signature

Signature Section:

Signature:
Date: 9 - 1

Signatory's Name: Daniel Brennan

Signatory's Position: Vice President of Legal and Senior Counsel

Signatory's Phone Number: XXX-XXX-XXXX

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).

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