

FORM J  
[Clause 3(j)]

**Revocation of Enduring Power of Attorney**

I revoke the Enduring Power of Attorney previously given by me on \_\_\_\_\_  
(date)

appointing \_\_\_\_\_  
(name of attorney)

as my (check one)  personal attorney  property attorney  personal and property attorney

\_\_\_\_\_  
(Signature of grantor)

\_\_\_\_\_  
(date)

I, \_\_\_\_\_,  
(name)

of \_\_\_\_\_  
(street address) (city) (province) (postal code)

certify:

(a) that I witnessed the signing of this revocation of Enduring Power of Attorney by \_\_\_\_\_  
(name of grantor)

dated \_\_\_\_\_ ;

(b) that in my opinion the grantor understood the nature and effect of an Enduring Power of Attorney, and the effect of terminating an Enduring Power of Attorney, at the time that he or she signed this document.

\_\_\_\_\_  
(Signature of witness)

\_\_\_\_\_  
(date)