

KENTUCKY PUBLIC EMPLOYEES' DEFERRED COMPENSATION AUTHORITY

REVOCATION OF LIMITED POWER OF ATTORNEY

**NOTE:** If a Power of Attorney is not submitted on the standard forms, it will have to be reviewed by the legal department for the Authority first, to determine if it complies with Kentucky law.

I, \_\_\_\_\_, of \_\_\_\_\_, \_\_\_\_\_, do hereby terminate, nullify and revoke my Limited Power of Attorney dated \_\_\_\_\_, 20\_\_, effective as of the date this Revocation is accepted by the Kentucky Public Employees' Deferred Compensation Authority.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Please Print Name)

Date: \_\_\_\_\_

STATE OF \_\_\_\_\_ )

)

COUNTY OF \_\_\_\_\_ )

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

ACCEPTED BY:

KENTUCKY PUBLIC EMPLOYEES'  
DEFERRED COMPENSATION AUTHORITY

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_