

**REVOCATION OF GRANDPARENT POWER OF ATTORNEY
FOR THE MINOR CHILD, _____**

I, _____, residing at _____
_____, in the County of _____, State of Ohio, hereby **REVOKE and
RENDER VOID** the Grandparent Power of Attorney that I previously gave to _____
_____, r e s i d i n g a t _____
_____, to act as my attorney in fact
to exercise any all of my rights and responsibilities regarding the care, physical custody, and
control of the child, _____, b o r n
_____, e x e c u t e d o n o r a b o u t
_____.

I further attest that a photostatic copy of this Revocation of Grandparent Power of Attorney constitutes a “duplicate original” of said Revocation of Grandparent Power of Attorney and is as effective as the original revocation itself.

Witness my hand this _____ day of _____, _____.

(Legible Parent / Custodian / Guardian Signature)

STATE OF OHIO

COUNTY OF _____

Sworn to or affirmed and subscribed before me by _____ on this
date of _____, _____.

Signature of Notary Public

(Affix seal here)

Title or Rank of Notary Public

Commission Expiration Date:
