

Account Holder/Client:	Account number:
	(Filled by Dukascopy)
V.09.07.2010	

V.09.07.2010	
REVOCATION OF F	POWER OF ATTORNEY
The undersigned (herein	nafter referred to as Client) hereby revokes the power of attorney from:
The Attorney:	
Individual	
Name :	
Surname :	
Nationality:	
Legal Address :	
City:	
Postal Code :	
Country:	
Legal Entity	
Company Name :	
Date of Incorporation:	
Place of Incorporation/ Commerce Register :	
Registered Office :	
City:	
Postal Code :	
Country:	
All other Powers of Atte effective as of the date h	orney eventually granted are not concerned by this revocation. This revocation is nereof.
Place and date:	
Signature of the Holder/Client:	
noider/Client:	