Revoke Power of Attorney Form

First Name:						
Surname:						
Date of birth:						
Address:						
Phone number:						
Account number at MT4/MT5:						
Revoke POA num	nber/date:					
Trader`s name:						
The reason to re	voke POA:	1				
Date:						
Signature:						
Stamp (for institutions)						

To revoke POA, please fill out and sign the Revoke POA Form. Any requests to revoke POA will be processed within one business days.

For more information please contact us by email info@fxex.net