

## Revocation of power of attorney

Use this form if you want to revoke a power of attorney from the Swedish Migration Agency. You cannot use this form to revoke a power of attorney that you have given to your public counsel.

| Surname (Family name), First name(s)          |               |  |
|---|---------------|--|
| Date of birth/Personal ID No. (YYYYMMDD-NNNN) |               |  |
| Address                                       |               |  |
| 2. The revocation takes effect (mark with a   | a cross)      |  |
| immediately                                   |               |  |
| starting on                                   | (YYYY-MM-DD)  |  |
| 3. My personal data                           |               |  |
| Surname                                       | First name(s) |  |
| Date of birth/Personal ID No. (YYYYMMDD-NNNN) | Case number   |  |
| Address                                       | I             |  |
| 4. My signature                               |               |  |
| , ,   |               |  |
| Place and date                                | Signature     |  |