SPECIAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

	That	I,	(full	name	as	reflected	in	the	passport)
						_, (citizenship) _		,	of legal age,
residing	at (cur	rent add	dress)				,	and wi	ith mobile
number			, [OO NAME, (CONSTI	TUTE AND APP	OINT, (full name o	of appointee)
				, (citize	enship o	f appointee)			of legal age,
and res	siding at	(current	residence (of appointee			to	be my tru	ue and lawful
ATTOR	NEY-IN-	FACT, to	do and pe	rform the foll	lowing ac	ets:			
1.	Submit my accomplished Fingerprint Card to the NBI for processing and receive from said office my NBI Clearance;								
2.	Submit my NBI Clearance to the DFA for authentication and receive the authenticated document from the same office; and								
	Having the above authenticated document be sent to my residential address in Germany.								
all inten	form all ants and proceedings of any occurrence of the formal and	and ever urposes and here	y act requi	site or neces or could lawfo and confirm	ssary to outlined	d attorney in factory into effect to personally presenated at my said attornated	the foreg	going powe full power c	ers, as fully to
	ITIW NI	NESS W	HEREOF,	I have her	eunto s	et my hand this	3		at the
Embassy of the Philippines, Berlin, Germany.									
			_	_	ure of Pi inted ful	•	_		
Signed in the presence of:									
			Witnes	SS		Witne	SS		
ACKNOWLEDGEMENT									
Consul	sy of the ar Section Germany	on) S.S.	ic of the P	hilippines)					
passpoi	BEFORI	E ME , d	uly commis	sioned and	qualified	, personally appo , having exhib	eared (fu	<i>ıll name as</i> ne his/her at <i>(nla</i>	s reflected on Passport No.
foregoir togethe	ng instrur	ment and	, knowi d acknowle	n to me and dged to me	I to me k that the :	nown to be the same is his/her f	same pe ree and	erson who voluntary a	executed the act and deed,
Service I Doc. No. Book No		: :							
Fee Paid		· :							
O.R. No.	. :	:				Adm	inisterir	ng Officer	