

SPECIAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That We, _____, and _____,
_____, _____, citizens respectively, of legal age, with residence and postal
address at _____, Spain,
hereby name, constitute and appoint, _____,
Filipino citizen, of legal age, and a resident of _____
_____, Philippines, to be my true and lawful

ATTORNEY-IN-FACT, for me and in my name, place and stead, to do and perform the following acts, deeds
and things, to wit:

1. To obtain from the Local Civil Registry/Philippine Statistics Authority (PSA) or the National Bureau of
investigation (NBI) the following:
Document 1: _____
Document 2: _____
Document 3: _____
Document 4: _____
2. To arrange for the authentication or legalization of the above mentioned document/s with the
Authentication Division of the Department of Foreign Affairs (Affixing the Apostille Certificate), and
other concerned offices;
3. To sign the paper/s, document/s and other instrument/s that may be necessary or required for the
processing of the above-mentioned document/s and;
4. To receive the above mentioned document/s upon release from the Authentication Division of the
Department of Foreign Affairs and other concerned offices.

HEREBY GIVING AND GRANTING unto my said **ATTORNEY-IN-FACT** full power and authority to do and perform
all and every act that may be necessary or requisite relative to the above, as to all intents and purposes as I might do if
personally present and acting in person, hereby ratifying and confirming all that my said **ATTORNEY-IN-FACT** shall
lawfully do or cause to be done in and about the above matter by virtue of these presents.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____ in
the year _____ at the Philippine Consulate General in Barcelona, Spain.

Signature over Printed Name

Passport No: _____

Issued on: _____

Issued at: _____

Signature over Printed Name

Passport No: _____

Issued on: _____

Issued at: _____

Signed in the presence of:

Witness

Witness

CONSULATE GENERAL OF THE)
REPUBLIC OF THE PHILIPPINES) **S.S.**
BARCELONA, SPAIN)

DOC NO.:
SERVICE NO.:
O.R. NO:
FEE PD:
SERIES OF