SPECIAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That We.	, and	
	, citizens respectively, of leg	
address at		, Spain,
•	1	
Filipino citizen, of legal age, and a re	sident of	
	, Philip n my name, place and stead, to do and	ppines, to be my true and lawful perform the following acts, deeds
and things, to wit:		
1		
2		
3.		
might do if personally present and act FACT shall lawfully do or cause to be of	necessary or requisite relative to the above ing in person, hereby ratifying and confirm done in and about the above matter by virtue hereunto set my hand thisday of usulate General in Barcelona, Spain.	ing all that my said ATTORNEY-IN- e of these presents.
	Signature over Printed Name	Signature over Printed Name
	Passport No:	Passport No:
	Issued on:	Issued on:
	Issued at:	Issued at:
Signed in the presence of:		
	Witness	Witness
CONSULATE GENERAL OF THE REPUBLIC OF THE PHILIPPINES BARCELONA, SPAIN)) S.S.)	
DOC NO.: SERVICE NO.: O.R. NO:		

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