SPECIAL POWER OF ATTORNEY

KNOW	ALL ME	N BY THES	E PRES	ENTS:										
	I/We,	 narried/sep					/ _							of lega
						_,Irelan	ıd., do	hereby _ reside	name, ent of	, consti	tute	and	appo	oint
											_ to	be m	y/our	true and
		ey, for me s and thin			ny/our	name	, place	and ste	ead, to	do ano	I pei	form	the	following
might	oever r	BY GIVIN equisite o ld lawfully shall lawf	r neces do if p	sary o person	r prop ally pr	er to b esent,	e done and h	within t ereby ra	he abov atifying	/e-cited and co	part ofirm	ticula iing a	r act/	s as I/w
	IN WI	ΓNESS W	HEREC	OF, I/w	e have	e hereu	unto se	t my haı	nds this	da	y of		2	0
		Philippine/Irisl Date of Issue Place of Issue		nature) No			Da	(aff. hilippine/Iris ate of Issue ace of Issue		ture) No.				
	Signed	in the prese	nce of:_					 , 						

(signature of witnesses)