

EMBASSY OF THE PHILIPPINES }
OTTAWA, ONTARIO } S. S.
CANADA }

GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

I, _____, of legal age, citizen of _____,
and a resident of _____,
do hereby name, constitute and appoint _____, 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 and
things, namely:

1. To (tick appropriate boxes):
 Sell Buy Lease Mortgage Dispose of
the following property/ies registered under my name as described hereunder: *(Describe each property by the
Transfer Certificate of Title or Tax Declaration Number, including technical description of property)*

2. To manage all my financial concerns, including the opening and closing of bank accounts, deposit, withdrawal,
or transfers from the following accounts: *(Specify the bank account numbers per bank, branch, and address)*

3. To demand, sue for, recover, collect any or all sums of money, debts, dues, accounts, interests, dividends, and
other things of value or whatever nature as may now be or may hereafter become due, owing, payable, or
belonging to me, and to have, sue, and to take any and all lawful ways and means for the recovery thereof;
4. To make, sign, execute, and deliver contracts, documents, agreements, and other writings of whatever nature
or kind, with any or all third persons, concerns, or entities upon terms and conditions acceptable to my said
attorney-in-fact;

HEREBY GIVING AND GRANTING unto my said attorney-in-fact, full power and authority whatsoever requisite or
necessary to carry into effect the foregoing authority, as fully to all intents and purposes as I might or could lawfully do if
personally present, and hereby ratifying and confirming all that my said attorney-in-fact shall lawfully do or cause to be done
by virtue hereof.

This authority shall be valid until revoked.

IN WITNESS WHEREOF, I hereby set my hand this date of _____, in Ottawa, Ontario, Canada.

Affiant's Signature over Printed Name
Passport No. _____
Issued on _____

Signed in the presence of:

Witness's Signature over Printed Name

Witness's Signature over Printed Name