SPECIAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

I / We, _____, by these presents do hereby depose and state that:

1. I am/ We are of legal age, single/married and a resident of _____; _____;

2. I am/ We are the bonafide owner of Savings Account/ Certificate of Time Deposit/ Current Account No/s. (the "Account")_____ issued by the closed _____ (name of closed bank).

3. There exists no conflict or dispute arising from my/ our ownership and possession of the account/s. The account/s is/are my/our legitimate deposit/s with the bank;

   I /We hereby **NAME, CONSTITUTE AND APPOINT** _____ (name of attorney-in-fact), who is/are of legal age, single/married and a resident of _____; _____ as my/our true and lawful attorney-in-fact, for me/us and my name, place and stead, for my/ our own use and benefit, to do and perform any or all of the following acts and things:

   (a) File a claim for payment of the deposit insurance with the Philippine Deposit Insurance Corporation (PDIC) for the above-stated account/s;
   (b) Sign all documentary requirements relative thereto;
   (c) Receive cash (if the amount is ₱10,000.00 & below) or cheque payment (if the amount is above ₱10,000.00) from PDIC for my insured deposit;
   (d) Sign consent to offset outstanding obligations against deposits; and
   (e) File a claim against the assets of the bank and receive payment thereof.

HEREBY GIVING AND GRANTING unto my/our attorney-in-fact full power and authority to do and perform every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully to all intents and purposes as I/ We might or could lawfully do if personally present, hereby ratifying and confirming all that my/our attorney-in-fact shall lawfully do or cause to be done by virtue of these presents.

HEREBY ASSERTING that I/we shall be held personally liable to any person, natural or juridical, that may be prejudiced by my/our representations, in addition to other liabilities, civil or criminal, that may arise therefrom; hereby releasing and discharging PDIC from any and all further obligations in connection with this claim; and I/we further undertake to refund PDIC the amount paid to me/us /received by my/our attorney-in-fact including interest thereon and indemnify PDIC, the bank and/or third parties for any loss or damage occasioned by such payment.

It is understood that personal information processed by PDIC as a result of submission of this document will be used for the purpose of verification and settlement of claims against the closed bank and may be shared with other government offices or third parties as may be required by law or lawful order and in relation to the performance by PDIC of its mandates to promote and safeguard the interests of the depositing public and help maintain a sound and stable banking system. It is acknowledged that PDIC implements adequate measures to uphold the rights of its data subjects including its employees and protect personal data in compliance with the Data Privacy Act of 2012.

IN WITNESS WHEREOF, I have hereunto set my hand on this ___ day of _____ at _____.

_____	_____	_____
Principal	Principal	Principal

Conforme:

_____
Name & Signature of Attorney-in-Fact

Signed in the presence of:

_____ _____

ACKNOWLEDGMENT

Republic of the Philippines)
_____) S.S.

BEFORE ME, a Notary Public for and in _____ on this _____ day of _____, personally appeared _____, known to me to be the same person who executed this Special Power of Attorney and acknowledged to me that the same is his/her free and voluntary act and deed.

Witness my hand and seal.

Notary Public

Doc. No. _____;
Page No. _____;
Book No. _____ __;
Series of _____.