

6. To receive the proceeds of the above-mentioned loan.

This Special Power of Attorney is coupled with interest being one of the requirements and considerations of the BANK for the granting of the loan to us. It is agreed that this Irrevocable Special Power of Attorney shall not be revoked or cancelled without the prior written consent of the BANK.

HEREBY GIVING AND GRANTING unto my/our said Attorney-in fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary or proper to be done in and about the premises as I/we might or could do if personally present and acting in person; and HEREBY RATIFYING AND CONFIRMING all that my/our said Attorney-in-Fact shall lawfully do and or cause to be done under and by virtue of these presents. Further, I hereby ratify expressly and irrevocably the authority of my/our said Attorney-in-fact and confirm to be valid and binding upon me/us any and all notes, mortgages, documents and agreements executed by my/our said Attorney-in-fact prior to the date hereof in connection with the above authority given.

IN WITNESS WHEREOF, I/we have hereunto set my/our hands at, on this day of

.....
Principal

.....
Attorney-in-fact

SIGNED IN THE PRESENCE OF

.....
ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES }
_____] S.S.

BEFORE ME, the undersigned Notary Public, this ___ the day of _____, personally appeared:

Name	Competent Evidence of Identity	Date/Place Issued
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known to me through competent evidence of identity to be the same persons who executed the foregoing instrument and acknowledged to me that the same is their free and voluntary act and deed.

This instrument refers to a Special Power of Attorney, consisting of two (2) pages including this page whereon this acknowledgment is written, signed by the parties and their witnesses and sealed by my notarial seal.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal on the date and at the place above written.

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