

# Power of Attorney for Banking Transactions

Date:

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I, the undersigned (Full Name of Principal):

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Address:

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ID/Passport No.:

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hereby appoint (Full Name of Attorney-in-Fact):

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Address:

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ID/Passport No.:

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to act on my behalf in all matters relating to my bank accounts and to transact, operate, deposit, withdraw, endorse, sign, and perform all necessary actions with the following bank(s):

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Bank Account Number(s):

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This Power of Attorney is valid from

\_\_\_\_\_ to \_\_\_\_\_

Special Instructions / Limitations (if any):

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Principal's Signature

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Attorney-in-Fact's Signature

Witnessed by:

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Signature:

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Date:

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