

**POWER OF ATTORNEY NO. \_\_\_\_\_**  
**on behalf of legal entity**

\_\_\_\_\_ 2019  
*(city)*

\_\_\_\_\_  
*(full name of the principal organization, indicating the type of business entity)*

as represented by \_\_\_\_\_,  
*(job title and full name of person issuing power of attorney)*

acting on the basis of \_\_\_\_\_,  
*(document establishing the authority of the person issuing power of attorney)*

**hereby authorizes** \_\_\_\_\_,  
*(full name of authorized person)*

passport number \_\_\_\_\_, contact telephone number \_\_\_\_\_,

to collect **participants' bags** in accordance with the attached list.

***List of participants attached (the power of attorney is not valid without the list).***

Power of attorney granted until \_\_\_\_\_ 2019.

Certified by \_\_\_\_\_  
*(Full name of authorized person)*                      \_\_\_\_\_  
*(signature of authorized person)*

Principal

\_\_\_\_\_                      **Organization seal**                      \_\_\_\_\_ / \_\_\_\_\_  
*(job title)*                      **seal**                      *(signature)*                      *(full name)*

AFFIX SEAL HERE

**List of participants**

<b>Full name</b>	<b>Date of birth</b>

EXAMPLE

Principal

\_\_\_\_\_  
*(job title)*

Organization  
seal

AFFIX SEAL HERE

\_\_\_\_\_/\_\_\_\_\_  
*(signature)* / *(full name)*