



**MEGA INTERNATIONAL COMMERCIAL BANK**

**Phnom Penh Brach:** 139-Independent Monument, BKK1,  
Chamkamorn, Phnom Penh,  
The Kingdom of Cambodia  
Tel: 023 988 101 Fax: 023 988 106

**POWER OF ATTORNEY**

**Phnom Penh, Date:** .....

Herewith this document I, Company/Partnership.....

Represented by: ..... Who

is authorized to act of Company/Partnership and on behalf of Company/Partnership, hereinafter referred to as "AUTHORISZER", made this document as attestation to the bank indicating that I, as Authorizer, hereby authorized to act as my legitimate representative, to have authorize to :

- (i) communicate with and take any actions for the purpose of applying for credit facilities and utilizing and withdrawing any money on credit facilities with the bank and
- (ii) sign on cheque to withdraw money from account, overdraw, apply for loan, overdraft, other money withdrawal documents from deposit account of **Mega International Commercial Bank, Phnom Penh Branch** in the name of .....

Account Number:.....Which was opened with Mega International Commercial Bank Phnom Penh Branch, or any documents or agreements relating to credit facilities, including authorized to endorse cheques, bill of exchange, promissory notes, or other negotiable instruments, in order to collect the money for deposit in the account, to certify balance statement of account for both creditor and debtor to the bank, in the name of aforementioned on my behalf as authorizer,

Any act, which .....as authorized person has committed as aforementioned, shall deemed as if I, as authorizer, has performed by myself. Should there be any damage, whatsoever, incurred, I, as authorized, agreed to take responsibility to reimburse to the bank for all the damages.

As evidence to this effects, authorizer, and authorized person, herby sign their names in the presence of witnessed on the Date, Month and Year indicated above

Signature: .....

Authorized person:

Signature: .....

Authorizer:

Signature: .....

Authorized person:

Seal:

Signature: .....

Authorized person:

Signature: .....

Authorized person: