SPECIAL POWER OF ATTORNEY

l,		(full name), the undersigned, of
		(full
address),		
, 0	specific power of attorney to all ol, 1114 BC Amsterdam, as my	
Said attorney-in-fact shall hav following acts on my behalf:	re full power and authority to unc	dertake and perform only the
	ecessary to terminate and transfe surance intermediaries	er all my current private insurance
Furthermore I hereby also ded	clare to have received the Tellus	B.V. "dienstenwijzer".
•	ctive upon execution. This power n will be in writing addressed to ⁻	r of attorney may be revoked by Tellus B.V.
Signed this	day of	, 20
		(signature)