STATE OF CALIFORNIA – DEPARTMENT OF INSURANCE SPECIAL POWER OF ATTORNEY TO APPOINT AND CERTIFY AGENTS

CDI-022 (Rev. 11/2015)

Know All Men by These Presents:
That, an insurer of the State of,
That, an insurer of the State of, admitted to transact insurance in the State of California, does hereby appoint:
(Name natural persons only)
its attorney(s)-in-fact to appoint persons and entities to act as and to be licensed as agents in the State of California, and to terminate the said appointments, and, if the said insurer be a life insurer or an insurer admitted to transact disability insurance, it empowers the said attorney(s) to make and sign on its behalf statements on applications for licenses to act as life and disability agent, life only agent or disability only agent concerning the applicants therefore.
IN WITNESS WHEREOF, the said insurer has to these presents caused its name to be subscribed and attested by its President and Secretary at, State of, this
day of 20
Name of Insurer
By: President
By: Secretary
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.
State of) County of)
On before me, (Notary Public)
personally appeared, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.
Signature(Seal)