

## Power of Attorney

### Signatory 1 (part 1):

Name:		Tel. no.:	
Address:		E-mail:	
Postal Code:			
City:			
Country:			

### Signatory 2 (part 2):

Name:		Tel. no.:	
Address:		E-mail:	
Postal Code:			
City:			
Country:			

### Authorizes power of attorney to:

Name:	Tatiana Ruschmeyer	Tel. no.:	+49 1522 3053792
Address:	Taja- Heiratsagentur	E-mail:	<a href="mailto:info@taja-heiratsagentur.com">info@taja-heiratsagentur.com</a>
Postal Code:	27404		
City:	Elsdorf		
Country:	Germany		
Case number:		(Not mandatory)	

With this power of attorney, the person is authorized to manage the entire process of our application with the Agency of Family Law for a Certificate of Marital Status. The abovementioned person is our representative and is now acting on our behalf.

We confirm that all future correspondence from the Agency of Family Law will go to our representative (who has power of attorney).

The power of attorney is valid for as long as the Certificate of Marital Status is valid and may also be used during a potential appeal period when a case is closed. We may at any time withdraw the power of attorney by notifying the Agency of Family Law.

\_\_\_\_\_  
Place/date Principal signature (part 1)

\_\_\_\_\_  
Place/date Principal signature (part 2)

\_\_\_\_\_  
Place/date Authorized signature (Power of Attorney)