

## POWER OF ATTORNEY CERTIFICATION FORM

Email: <u>AnnuityService@PacificLife.com</u>
Web Site: <u>www.PacificLife.com</u>

2829

Clients: (800) 722-4448

Financial Professionals: (800) 722-2333

Fax: (888) 837-8172 RIAs: (833) 953-1863 Clients & Financial Professionals: (800) 748-6907

Fax: (800) 586-0096

ALL OVERNIGHT DELIVERIES: Pacific Life Insurance Company 6750 Mercy Rd, RSD

Omaha, NE 68106

•	means an individual who grants authority to an Attorney-in-Fact in a Power of Attorney person granted authority to act for a principal under a POA.	, , ,	-in-	(AIF) means a	
•	You must attach a complete copy of the POA along with any Riders or addendums that may be rec date is contingent upon an event or occurrence (such as incompetency of the Principal) you must that the event or occurrence has happened.  Pacific Life will review the POA to determine that it has become effective and that its powers grant and/or changes pertaining to this policy or contract.  If the POA grants authority to multiple AIFs each AIF must complete and sign a separate Certificati	also attach the AIF aut	n the proof as red	quired by the POA	
1	PRINCIPAL INFORMATION Name (First, Middle, Last)		Annuity Contract Number(s)		
2	ATTORNEY-IN-FACT INFORMATION Name (First, Middle, Last)		Daytime Phone Number		
	_ <b></b>				
	SIGN HERE				
	Attorney-in-Fact's Signature	mo	o / day /	yr	
6	NOTARY				
	Γ	(notary seal)			
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Signature

Pacific Life refers to Pacific Life Insurance Company (Newport Beach, CA) and its affiliates, including Pacific Life & Annuity Company. Pacific Life Insurance Company is the issuer in all states except New York. Pacific Life & Annuity Company is the issuer in New York.

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