То	: Thornton Global Wealth Management Limited
Re	: Letter of Appointment
Policy Number(s)	:
Policyholder(s)	: <u> </u>
Insured(s)	:
Effective Date of Appointment	: Immediately
my/our exclusive appointment sup-	have appointed as insurance consultant for the above policy(ies). This ersedes all previous appointments and the authority hall remain in full force until cancelled in writing.
Yours faithfully,	
Authorized Signato (with company cho	
Name	:
Date	: