**BARANGAY CERTIFICATION**

RE/SUBJECT: INDIGENCY

TO WHOM IT MAY CONCERN

This is to certify that {name}, residing at {address} belongs to indigent citizens of this barangay.

Issued this {day} day of {month}, {year} upon request of the interested party for Educational Assistance Requirement.

Prepared By:

MARIA DENNISE B. MORENO Attested by:

Barangay Secretary HON. ROLANDO M. RAFON

Punong Barangay

CTC NUMBER: **{CTCNumber}**

DATE ISSUED: **{date2}**

PLACE ISSUED: **{place}**

AMOUNT PAID: **{amount}**

OR NUMBER: {ORNumber}

DATE ISSUED: **{date3}**