

# CERTIFICATE OF INDIGENCY

**Barangay:** \_\_\_\_\_

**Municipality/City:** \_\_\_\_\_

**Province:** \_\_\_\_\_

This is to certify that the person whose name appears below is a bonafide resident of this barangay and belongs to an indigent family based on the assessment and record of this office.

**Name of Applicant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Purpose:** \_\_\_\_\_

This certification is issued upon the request of the above-named person for whatever legal purpose it may serve.

Issued this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at Barangay \_\_\_\_\_.

Prepared by:

\_\_\_\_\_  
Barangay Secretary

Approved by:

\_\_\_\_\_  
Barangay Captain