

REPUBLIC OF THE PHILIPPINES
OFFICE OF THE CITY CIVIL REGISTRAR
Lapu-Lapu City

Date

To Whom It May Concern:

We certify that, among others, the following facts of Death appear
in our Register of Deaths on page _____ of book number _____.

LCR Registry Number	:	_____
Date of Registration	:	_____
Name of the Deceased	:	_____
Sex	:	_____
Age	:	_____
Civil Status	:	_____
Citizenship	:	_____
Date of Death	:	_____
Place of Death	:	_____
Cause of Death	:	_____

This certification is issued to _____ upon his/her
request.

Verified by:

Amount Paid	:	_____
O.R. Number	:	_____
Date Paid	:	_____

Note: A mark, erasure or alteration of any entry invalidates this certification.