**BARANGAY CLEARANCE**

**DATE**

**To Whom It May Concern:**

I hereby certify that the following are:

**PWD (person With Disability)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Surname** | **First Name** | **MI** | **Address** |
| 1 | Maceo | Lowell Jem | Sanchez | 1 Epic StreetSt., Caridad, Cavite City |
| 2 | Very Epic | Epic Man |  | 11 11St., Caridad, Cavite City |
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| **Antonio C. Diesta, III**  Barangay Chairman |