**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 | S | 1 Epic Street St., Caridad, Cavite City |
| 2 | Very Epic | Epic Man | S | 11 11 St., Caridad, Cavite City |

|  |
| --- |
| **Antonio C. Diesta, III**  Barangay Chairman |