**CERTIFICATION OF INDIGENCY**

***To whom it may concern:***

This is to certify that **${name},** ${age} year old, born on ${birthdate}, is a *bona fide* resident of ${completeaddress}, belongs to a low income and indigent family.

This certification is being issued upon the request of the partner ${secondperson}. in connection to his intent to seek for **MEDICAL ASSISTANCE** and for whatever legal purpose this may serve best.

Issued this $**{reviseddate},** at Talisayan, Zamboanga City, Philippines.

**HON. JUANITA Q. ESCOBAL**

Punong Barangay