



Republic of the Philippines

Sandiganbayan

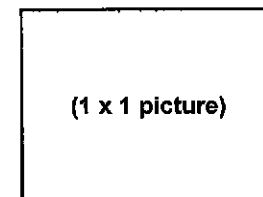
Quezon City

<p>Requirements:</p> <ol style="list-style-type: none"> 1. Accomplished Form with 1x1 picture 2. Affidavit of Denial (If with namesake) 3. Processing Fee - P100.00 (If filed by mail please attached Postal Money Order pay to SANDIGANBAYAN enclosed with self addressed stamped envelope.) 4. Letter of authorization if through representative. 	<p>Steps in Securing Clearance</p>
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Date : _____

ATTY. MA. TERESA S. PABULAYAN

Executive Clerk of Court IV
Office



Madam:

May I respectfully request for Clearance/Certificate in connection with my

(PURPOSE OF CLEARANCE)

~ PLEASE WRITE LEGIBLY ~

Signature over Printed Name

APPLICANT'S PERSONAL DATA :

First Name:		Civil Status:	
Complete Middle Name:		Date of Birth:	
Last Name:		Place of Birth:	
Residential Address:		Sex:	
		Tel. No.:	
Office & Office Address:		Mobile No:	
		E-mail Address:	

(This Portion is for the Docket Section)

Sandiganbayan

Commonwealth Avenue, Quezon City

~ please write legibly ~

Date : _____

A certain _____
(Name of Accused)

of _____
(Office)

was charged before Sandiganbayan in Criminal/Civil/Case/s/No./s _____
filed on _____ for _____
(Designation of Offense)

said case/s _____
(Status of Case/s)

Note : As of this date and per records on file **NO CRIMINAL/CIVIL/CASE/s** has been filed against

LEONORA R. CONTACTO
Chief Judicial Staff Officer
Judicial Records Division

(Complete Name)

No validity/expiration date: Only issued date as per Certification.

/eac