



Republic of the Philippines
Sandiganbayan
 Quezon City

REQUIREMENTS	STEPS IN SECURING CLEARANCE
1. Accomplished Form with 1x1 picture 2. Affidavit of Denial (If with namesake) 3. Processing Fee - P100.00 (If filed by mail, please attach Postal Money Order payable to SANDIGANBAYAN enclosed with self-addressed stamped envelope 4. Letter of authorization if filed through a representative	Docket Section ↓ Statistics Section ↓ Office of the ECC IV ↓ Cashier ↓ Office of the ECC IV

Date: _____

ATTY. MA. TERESA S. PABULAYAN
 Executive Clerk of Court IV
 Sandiganbayan

Madam:

May I respectfully request for Clearance / Certificate in connection with my _____
 (purpose of clearance)

Signature over Printed Name

=====

APPLICANT'S PERSONAL DATA: Print legibly. Mark appropriate boxes with

1x1 picture

Note: Please skip one space after each name (those with 2 or more names)

First Name:	<table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Date of Birth:	(mm/dd/yyyy)
Complete Middle Name:	<table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Place of Birth	
Last Name:	<table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					E-mail Address:	
Civil Status:	<input type="checkbox"/> Single <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Married <input type="checkbox"/> Annulled	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female																				
Residential Address:		Telephone No.:																					
Office & Office Address:		Mobile No.:																					

(This portion is to be accomplished by the DOCKET Section)

Date: _____

A certain _____
 (Name of Accused)
 of _____
 (Office)
 was charged before the 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 available records of this office, NO CRIMINAL/CIVIL/CASE/s has been filed against

 (Complete Name)

SANDRA P. CALUGAY
 Chief Judicial Staff Officer
 Judicial Records Division