

REPUBLIC OF THE PHILIPPINES)
_____ CITY) ss.

QUALIFIED BENEFICIARY DECLARATION

I, _____, of legal age, Filipino, with residence in _____, hereby declare the following to be true and correct:

Ako si _____, nasa hustong gulang, Filipino, at nakatira sa _____, ay nagsasalaysay at nagpapatunay sa mga sumusunod:

1	Personal Details <i>(put N/A if not applicable)</i>	
	Full Name <i>Pangalan</i>	
	Contact No. <i>Telepono</i>	
	Source/s of Income <i>Kabuhayan/ Trabaho</i>	
	Name of employer, if any <i>Pangalan ng employer, kung mayroon</i>	
	Position in Employment <i>Posisyon sa trabaho, kung mayroon</i>	
	Combined Monthly Family* Income <i>Buwanang kita ng pamilya**</i>	
	* “Family” includes the parents, sibling/s, spouse, and child/children of the applicant. ** Kabilang sa “pamilya” ang mga magulang, kapatid, asawa, at anak ng aplikante.	
2	Brief Description of the Legal Aid Services Sought (additional sheet/s may be used) <i>Maikling Pagsasalaysay ng Tulong Legal na Nais Matanggap</i>	

3	Grounds Applied for as a Qualified Beneficiary <i>Batayan ng Aplikasyon bilang Qualified Beneficiary</i> I am applying as a Qualified Beneficiary under the ULAS Rules based on the ground/s that <i>Ako ay nag-a-apply bilang Qualified Beneficiary ng ULAS Rules dahil</i> ☐ I have no money or property sufficient and available for food, shelter, and basic necessities for myself and my family. <i>Wala akong sapat na pera o ari-arian para sa pangangailangan ko at ng aking pamilya.</i> ☐ My gross monthly income, together with that of my immediate family, does not exceed double the monthly minimum wage in the place where I reside. <i>Ang aking buwanang kita, kasama ng kita ng aking pamilya, ay di hihigit sa doble ng buwanang minimum wage sa lugar kung saan ako nakatira.</i> ☐ I do not own real property with a fair market value of more than PHP 300,000.00 as stated in its current tax declaration. <i>Wala akong ari-arian na may fair market value na hihigit sa PHP 300,000.00 batay sa pinakahuling tax declaration nito.</i> ☐ I have no sufficient means to afford the adequate legal services sought above. <i>Wala akong pantustos sa karampatang tulong legal na nais kong matanggap.</i>
4	Explanation of Applicable Ground <i>(explain or detail the applicant's circumstances in support of the ground/s selected in [3])</i> <i>Ipaliwanag ang batayan ng aplikasyon bilang Qualified Beneficiary/ kalagayang pinansyal ng aplikante.</i>

5	Supporting Documents Presented, if any Mga dokumentong kalakip ng aplikasyon, kung mayroon man
6	Date of Execution Petsa ng Pagsasakatuparan
	I have signed this form on this date of Petsa ng paglakip ng lagda
	Signature Lagda
	Full Name Pangalan
7	Jurat (to be accomplished by the notary public) This is not required if this form is executed outside of the Philippines.
Subscribed and sworn to before me on _____, in _____ City, affiant exhibiting to me the following competent proof of identity: _____. NOTARY PUBLIC Doc. No. _____ Page No. _____ Book No. _____ Series of _____.	

COVERED LAWYER’S CERTIFICATION

I, _____, a member of the Philippine Bar with Roll Number _____, hereby certify that on _____, I interviewed _____ (the “Applicant”) and examined the foregoing Applicant’s Qualified Beneficiary Declaration and any and all supporting documents attached thereto. Upon personal assessment, I have determined that

- (a) the Applicant is a Qualified Beneficiary as defined in Section 4(g) of the ULAS Rules and Section 3, Rule 5 of the ULAS Rules Manual; and
- (b) the assistance sought by the Applicant constitutes a *Pro Bono* Legal Aid Service as defined in Section 4(f) of the ULAS Rules and Section 2, Rule 4 of the ULAS Rules Manual.

I confirm the foregoing to be true and correct.

Name

Date

COVERED LAWYER’S CERTIFICATION

I, _____, a member of the Philippine Bar with Roll Number _____, hereby certify that I have personally examined the following: (i) the Qualified Beneficiary Affidavit dated _____, executed by _____ (the “Applicant”), and any and all supporting documents attached thereto; and (ii) the Covered Lawyer’s Certification dated _____ executed by Atty. _____.

Upon personal assessment of these documents, I have determined that

- (a) the Applicant is a Qualified Beneficiary as defined in Section 4(g) of the ULAS Rules and Section 3, Rule 5 of the ULAS Rules Manual; and
- (b) the assistance sought by the Applicant constitutes a *Pro Bono* Legal Aid Service as defined in Section 4(f) of the ULAS Rules and Section 2, Rule 4 of the ULAS Rules Manual.

I confirm the foregoing to be true and correct.

Name

Date