	Email address:		Contact Nos.:
			Home Address:
Widdle Name	First Name	Surname	Name of Applicant.
St. P.			Name of Applicant:
	Control No.:		Type of Document:
	Airway Bill No.:		Region/Branch:
	DFA Release on:	Agency:	Name of Government Agency:
DFA-OCA-A-03	Claim Stub for DFA Authentication		

Note:

- DFA Authentication fee of Php100/document to be paid upon claiming the documents at DFA- Authentication Office.
- Authorized Representatives may claim Authentication of forwarded documents upon presentation of the following: 1) Original copy of the Notarized Special Power of Attorney from the owner of the document/s; if owner of the document/s is out of the country, SPA must be authenticated by the nearest Philippine Embassy or Consulate; for document/s of minor, SPA must be issued by either of the minor's parents; 2) Photocopy of the applicant's valid ID bearing his/her signature; and 3) Photocopy of representative's own valid ID bearing his/her signature.

Disclaimer:

- In the event of delayed delivery, document will only be released by the DFA once received from the Agency.

 All unclaimed documents will be disposed of after three (3) months from the scheduled date of release.

This portion must be filled out upon receipt of Document

- information provided. This form, when duly-signed and dated, shall constitute proof of ownership or possession of the documents submitted for authentication and confirms the veracity of the
- Total No. of Documents for Authentication:

Signature over Printed Name	Applicant/Representative's Date	
	DFA Receiving Processor	

This portion must be filled out upon receipt of DFA Authenticated Document

- 4, r), The signature on the space below indicates the applicant's confirmation of the accuracy of the entries contained on the DFA Authentication Certificate.
- Request for correction of entries on DFA Authentication Certificates must be brought to the attention of the Authentication Pending and Correction Unit within 24 hours upon receipt of Authenticated Document.
- Request for correction made beyond 24 hours shall be charged with corresponding authentication fee

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		OFA Releasing Personnel	
	Signature over Printed Name	Applicant/Representative's	
The state of the s		Date	

REVISION: 01 Authentication concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns or suggestions? Please fil up our Client Feedback Form or Call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns of the concerns of the concerns or call (02) 834-4000 loc 2106/2266 email: <u>authentication verification in the concerns of th</u></u></u></u></u></u></u></u>