

### PROOF OF SURVIVING LEGAL HEIRS

1. Name of deceased in full \_\_\_\_\_
2. Residence at time of death (complete address)  
\_\_\_\_\_
3. Name of Employer and address  
\_\_\_\_\_  
\_\_\_\_\_
- Position or assignment held at the time of death \_\_\_\_\_
4. (a) Date and place of deceased's birth \_\_\_\_\_  
  (Date)  (Place)  
    (b) From what source was date of birth obtained \_\_\_\_\_
5. (a) Date and place of death \_\_\_\_\_  
  (Date)  (Place)  
    (b) Cause of death \_\_\_\_\_
6. In what capacity, or by what title, do you claim the Home Development Mutual Fund (Pag-IBIG Fund) benefits of the deceased?  
\_\_\_\_\_
7. State whether the deceased has a last will and testament passed upon by a court and a regular administrator of the deceased's estate appointed by the court.  
\_\_\_\_\_
8. Give the names and addresses of the Surviving Heirs of deceased as of the date of hi/her death in the following order; (If any of them are under age of majority or legally incompetent, state also the names of their guardian, if they are under guardianship)
  - (a) Widow/Widower \_\_\_\_\_
  - (b) Children (Include all children whether they are legitimate, legally adopted, acknowledged natural or illegitimate. Attach their birth or Baptismal Certificates or adoption papers).

	<b>Status (legitimate, legally adopted, acknowledged natural or illegitimate)</b>	<b>Date of Birth</b>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

<b>(c) Name of Parents</b>	<b>State whether still living or already deceased</b>	<b>Date of Birth</b>
_____	_____	_____
_____	_____	_____

<b>(d) Paternal and maternal grandparents in the absence of persons called for in items (b), and (c) above.</b>		
_____	_____	_____
_____	_____	_____
_____	_____	_____

(e) Brothers and sisters in the absence of persons called for in items (b), (c) and (d) above. (Use another sheet if necessary)

	<b>Name of Brother/Sister</b>	<b>Age</b>	<b>Address</b>	<b>Guardian of Minors</b>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

(f) Children of deceased brother/s and sister/s. (State age, address and guardian of minors). This is required only in the absence of items (b), (c) and (d) above.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(g) Other relatives. (State relationship to deceased)

\_\_\_\_\_  
\_\_\_\_\_

The undersigned hereby make/s claim to the Pag-IBIG Fund provident benefits of the deceased \_\_\_\_\_ and declare, confirm, affirm and agree that the written statements and affidavits and all other papers called for the instructions hereon shall constitute declaration, confirmation and affirmation and they are hereby made a part of this Proof of Surviving Legal Heirs and further declare, confirm, affirm and agree that the furnishing of this form or any other forms supplemented thereto, to said Pag-IBIG Fund shall not constitute nor be considered an admission by the Pag-IBIG Fund that the deceased is entitled to the provident benefits under PD 1530 (As amended by Executive Order Nos. 527 and 538), PD 1752 (As amended by Executive Order Nos. 35 and 90, and Republic Act No. 7742), and RA 9679; nor a waiver of any of its right or defenses.

_____	_____	_____
<b>CLAIMANT</b>	<b>CLAIMANT</b>	<b>CLAIMANT</b>
ID No. _____	ID No. _____	ID No. _____
Valid until _____	Valid until _____	Valid until _____

With my marital consent:

_____	_____	_____
<b>SPOUSE</b>	<b>SPOUSE</b>	<b>SPOUSE</b>

**SIGNED IN THE PRESENCE OF:**

\_\_\_\_\_

**A C K N O W L E D G M E N T**

**REPUBLIC OF THE PHILIPPINES )S.S.**  
**PROVINCE/CITY OF \_\_\_\_\_)**

**BEFORE ME**, a Notary Public for and in the \_\_\_\_\_,  
Province of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
personally appeared the above-named person/s, who has satisfactorily proven to me  
his/her/their identity through his/her/their identifying documents written below  
his/her/their name and signature, that they are the same person/s who executed and  
voluntarily signed the foregoing Proof of Legal Heirs, duly signed by his/her/their  
instrumental witnesses at the spaces herein provided which he/she/they acknowledged  
to me as his/her/their free and voluntary act and deed.

The foregoing instrument relates to a Proof of Surviving of Legal Heirs consisting  
of \_\_\_\_\_ (\_\_\_\_) pages including the page on which this Acknowledgment is written,  
has been signed on the left margin of each and every page by the parties and the  
witnesses.

**WITNESS MY HAND AND NOTARIAL SEAL**, this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_, in the \_\_\_\_\_, Province of  
\_\_\_\_\_.

**NOTARY PUBLIC**

Doc. No. \_\_\_\_\_;  
Page No. \_\_\_\_\_;  
Book No. \_\_\_\_\_;  
Series of \_\_\_\_\_.