



\_\_\_\_\_) )  
\_\_\_\_\_) ) SS

### SWORN ATTESTATION

I, \_\_\_\_\_ citizen, \_\_\_\_\_  
Affiant's Name                                  Citizenship                                  Civil Status  
of legal age, with address at \_\_\_\_\_ after being sworn in accordance with  
law, do hereby depose and state that I am the mother/guardian of the affiant in the Affidavit to Use the  
Surname of the Father (AUSF); that my child/ward \_\_\_\_\_, is  
fully aware of the consequences of the use of the surname of his/her father.

In witness whereof, I hereby hereunto affixed my signature this day of \_\_\_\_\_,  
\_\_\_\_ 20\_\_\_\_, in \_\_\_\_\_.

Signature of Mother/Guardian  
over Printed Name

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_ in the  
city/municipality of \_\_\_\_\_, affiant exhibiting  
his \_\_\_\_\_ issued at \_\_\_\_\_  
on \_\_\_\_\_. I certify that I personally examined the affiant and that  
he/she voluntarily executed the foregoing affidavit and understood the contents thereof.

\_\_\_\_\_  
Signature over Printed Name  
of the Administering Officer

Doc. No     : \_\_\_\_\_  
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