

Republic of the Philippines  
**Department of Environment and Natural Resources**  
**OFFICE OF THE SECRETARY**  
Visayas Avenue, Diliman, Quezon City

**ANDRES M. GAJARION**  
**Represented by WILDE M.**  
**GAJARION,**  
*Appellant,*

- versus-

**DENR Case No. 10201**

**CELIA CUSI – MANALO,**  
**Represented by Rudolph**  
**Manalo,**  
*Appellee.*

X-----X

**MANIFESTATION**

**COMES NOW**, the herein appellant, as represented by his son,  
**WILDE M. GAJARION**, through the undersigned counsel, and unto this  
Honorable Office most respectfully states that:

1. The Appellant, Mr. Andres M. Gajarion died last 05 April 2022;
2. Attached herewith is a Certified Photocopy of his Certificate of Death attached as Annex "A";
3. As such, the undersigned respectfully informs this Honorable Office of such fact;
4. However, being residents of the same place, the address of the appellant remains to be the same at Sitio Asag, Barangay Don Pedro, Mansalay, Oriental Mindoro;

**Prayer**

**WHEREFORE**, premises considered, it is most respectfully prayed of  
this Honorable Office that this **Manifestation** be duly considered and  
favorably acted upon.

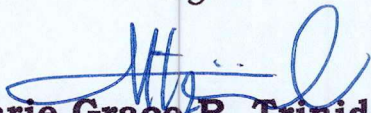


RESPECTFULLY SUBMITTED.

Roxas, Oriental Mindoro. 18 October 2022.

Department of Justice  
**PUBLIC ATTORNEY'S OFFICE**  
(Counsel for the Protestee)  
***Roxas District Office***  
Sta Fe, Bagumbayan, Roxas  
Oriental Mindoro

*By:*

  
**Marie Grace R. Trinidad**  
*Public Attorney III*  
*Roll Number 69259*  
*IBP Lifetime Member No. 016611*  
*MCLE Compliance No. VII -BEP004284*  
*Valid until: April 14, 2025*

Copy Furnished:

PENRO Oriental Mindoro

CENRO Roxas, Oriental Mindoro

The Regional Executive Director

The Assistant Secretary

The Undersecretary

Suqui, Calapan City Oriental Mindoro

San Mariano, Roxas, Oriental Mindoro

DENR – MIMAROPA  
Roxas Boulevard, Ermita, Manila

Legal Affairs, DENR

Legal, Administration, Human Resources, and  
Legal Affairs, DENR



Municipal Form No. 103  
(Revised August 2016)

(To be accomplished in quadruplicate using black ink)

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL  
**CERTIFICATE OF DEATH**

Province <u>ORIENTAL MINDORO</u>		Registry No. <u>2022-59</u>	
City/Municipality <u>MANSALAY</u>			
1. NAME (First) (Middle) (Last) <u>ANDRES MALLA GAJARION</u>		2. SEX (Male/Female) <u>MALE</u>	
3. DATE OF DEATH (Day, Month, Year) <u>05 APRIL 2022</u>	4. DATE OF BIRTH (Day) (Month) (Year) <u>25 DECEMBER 1925</u>	5. AGE AT THE TIME OF DEATH (Fill-in below according to age category) a. IF 1 YEAR OR ABOVE <u>96</u> b. IF UNDER 1 YEAR c. IF UNDER 24 HRS	
6. PLACE OF DEATH (Name of Hospital/Clinic/Institution/House No., St., Barangay, City/Municipality, Province) <u>DON PEDRO MANSALAY ORIENTAL MINDORO</u>		7. CIVIL STATUS (Single/Married/Widow/Widower/Annulled/Divorced) <u>WIDOWER</u>	
8. RELIGION/RELIGIOUS SECT <u>PROTESTANT</u>	9. CITIZENSHIP <u>FILIPINO</u>	10. RESIDENCE (House No., St., Barangay, City/Municipality, Province, Country) <u>DON PEDRO, MANSALAY, ORIENTAL MINDORO, PHILIPPINES</u>	
11. OCCUPATION <u>NOT APPLICABLE</u>	12. NAME OF FATHER (First, Middle, Last) <u>SILVINO GALICIA GAJARION</u>	13. MAIDEN NAME OF MOTHER (First, Middle, Last) <u>MAXIMA MELCHOR MALLA</u>	
<b>MEDICAL CERTIFICATE</b> (For ages 0 to 7 days, accomplish items 14-19a at the back)			
19b. CAUSES OF DEATH (If the deceased is aged 8 days and over)		Interval Between Onset and Death	
I. Immediate cause : a. <u>Undetermined rapid cause</u>		b. <u>CERTIFIED XEROX MACHINE COPY FROM ORIGINAL:</u>	
Antecedent cause : b. _____		c. _____	
Underlying cause : c. _____		d. _____	
II. Other significant conditions contributing to death: _____		e. _____	
19c. MATERNAL CONDITION (If the deceased is female aged 15-49 years old)			
a. pregnant, not in labour _____ b. pregnant, in labour _____ c. less than 42 days after delivery _____ d. 42 days to 1 year after delivery _____ e. None of the choices _____			
19d. DEATH BY EXTERNAL CAUSES		20. AUTOPSY (Yes / No)	
a. Manner of death (Homicide, Suicide, Accident, Legal intervention, etc.) _____		b. Place of Occurrence of External Cause (e.g. home, farm, factory, street, sea, etc.) _____	
21a. ATTENDANT		21b. If attended, state duration (mm/dd/yy)	
1 Private Physician _____ 2 Public Health Officer _____ 3 Hospital Authority _____ 4 None <u>X</u> 5 Others (Specify) _____		From _____ To _____	
22. CERTIFICATION OF DEATH			
I hereby certify that the foregoing particulars are correct as near as same can be ascertained and I further certify that <input checked="" type="checkbox"/> have attended / <input type="checkbox"/> have not attended the deceased and that death occurred at <u>7-22</u> on the date of death specified above.			
Signature _____		REVIEWED BY: _____	
Name in Print <u>SER KRISTIAN U. CARINGAL, M.D.</u>		Signature of Ser. Kristian U. Caringal, M.D. _____	
Title or Position <u>MUNICIPAL HEALTH OFFICER</u>		Date <u>APRIL 6, 2022</u>	
Address <u>POBLACION, MANSALAY, ORIENTAL MINDORO</u>			
23. CORPSE DISPOSAL (Burial, Cremation, If others, specify) <u>BURIAL</u>		24a. BURIAL/CREMATION PERMIT	
24b. TRANSFER PERMIT			
25. NAME AND ADDRESS OF CEMETERY OR CREMATORY <u>MANSALAY PUBLIC CEMETERY POBLACION MANSALAY, ORIENTAL MINDORO</u>			
26. CERTIFICATION OF INFORMANT		27. PREPARED BY	
I hereby certify that all information supplied are true and correct to my own knowledge and belief.		Signature _____	
Signature _____		Name in Print <u>MA. ZYRHENE F. HERRERA</u>	
Name in Print <u>WILDE M. GAJARION</u>		Title or Position <u>MESSENGER</u>	
Relationship to the Deceased <u>SON</u>		Date <u>APRIL 6, 2022</u>	
Address <u>POBLACION, MANSALAY, ORIENTAL MINDORO</u>			
Date <u>APRIL 6, 2022</u>			
28. RECEIVED BY		29. REGISTERED AT THE OFFICE OF THE CIVIL REGISTRAR	
Signature _____		Signature _____	
Name in Print <u>CORAZON M. FRONDA</u>		Name in Print <u>CORAZON M. FRONDA</u>	
Title or Position <u>MUNICIPAL CIVIL REGISTRAR</u>		Title or Position <u>MUNICIPAL CIVIL REGISTRAR</u>	
Date <u>APR 07 2022</u>		Date <u>APR 07 2022</u>	
REMARKS/ANNOTATIONS (For LCRO/CCRG Use Only)			