

**Sworn Authority to Submit List of Nominees and
Certificate of Acceptance of Nomination
with Affidavit of Non-Affinity**

Pursuant to the power and authority vested in me by existing laws, rules and regulations of _____, a coalition composed of _____
(Name of Coalition) _____
(Name of RPPPs Forming the Coalition) _____
duly accredited

by the Commission on Elections to participate in the **May 12, 2025 National and Local Elections (NLE) and BARMM Parliamentary Elections (BPE)**, I _____, the _____ of aforesaid
(Name) _____ *(Position)*
Coalition, hereby authorize _____ of legal age,
(Name of Authorized Representative)
with address at _____, to file the List of
(Address of the Authorized Representative)
Nominees and Certificate of Acceptance of Nomination with Affidavit of Non-Affinity of the Coalition.

(Name and Signature)

(Date)

(Name and Signature of Authorized Representative for Filing Purposes)

(Date)

SUBSCRIBED AND SWORN to before me this ___day of _____, ____ at _____, affiant exhibiting to me an Identification document/card which contains a photograph and signature bearing No. _____ issued by _____ on _____.

(Officer Authorized to Administer Oath)

Doc. No. _____;
Page No. _____;
Book No. _____;
Series _____.

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