



Republic of the Philippines  
**Department of Education**  
 Region III  
**Schools Division of Angeles City**

**RELEASED**

January 7, 2020

**DIVISION MEMORANDUM**  
 No. 06, s. 2020

JAN 07 2020  
 By \_\_\_\_\_  
 Schools Division Office Angeles City

**SUBMISSION OF SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH AS OF  
 DECEMBER 31, 2019**

To : All School Principals and Heads of Public Elementary and Secondary Schools and Senior High Schools  
 All Teaching and Non-Teaching Personnel  
 All Others Concerned

1. One of the good governance conditions that need to be complied with is the submission and filing of the Sworn Statement of Assets, Liabilities and Net Worth (SALN) of Officials and Employees which is in accordance with RA 6713, otherwise known as Code of Conduct and Ethical Standards for Public Officials and Employees, which states that SALN must be filed:
  - a. within thirty (30) days after assumption of the office;
  - b. on or before April 30 of every year thereafter; and
  - c. within thirty (30) days after separation from the service.
  
2. Failure to comply of an official to submit his/her SALN in accordance with the procedure and within the given period shall be a ground for disciplinary action. The offense of failure to file SALN is punishable with the following penalties:
  - a. 1<sup>st</sup> offense- suspension for one (1) month and one (1) day to six (6) months
  - b. 2<sup>nd</sup> offense- dismissal from the service
  
3. Attached is the format for the accomplishment of the Statement of Assets, Liabilities and Net Worth to be submitted in three (3) copies to this Office on or before **February 28, 2020** (Friday).



**Address:** Jesus Street, Pulungbulu, Angeles City  
**Telephone No.** (045) 322-4104  
**Email Address:** angeles.city@deped.gov.ph

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4. This Memorandum shall also take effect for all those who retired last School Year and the new teachers with permanent items.
5. For information, wide dissemination and strict compliance.

*ir tamayo*

**MA. IRELYN P. TAMAYO, PhD, CESE**  
Assistant Schools Division Superintendent  
Officer-In-Charge  
Office of the Schools Division Superintendent

dccd/AAVI/AOV

Control No. \_\_\_\_\_



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## SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of \_\_\_\_\_

(Required by R.A. 6713)

**Note:** Husband and wife who are both public officials and employees may file the required statements jointly or separately.

Joint Filing     
  Separate Filing     
  Not Applicable

**DECLARANT:** \_\_\_\_\_  
 (Family Name)                      (First Name)                      (M.I.)

**POSITION:** \_\_\_\_\_  
**AGENCY/OFFICE:** \_\_\_\_\_  
**OFFICE ADDRESS:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
 \_\_\_\_\_

**SPOUSE:** \_\_\_\_\_  
 (Family Name)                      (First Name)                      (M.I.)

**POSITION:** \_\_\_\_\_  
**AGENCY/OFFICE:** \_\_\_\_\_  
**OFFICE ADDRESS:** \_\_\_\_\_

### UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD

NAME	DATE OF BIRTH	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

### ASSETS, LIABILITIES AND NET WORTH

(Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household)

#### 1. ASSETS

##### a. Real Properties\*

DESCRIPTION <small>(e.g. lot, house and lot, condominium and improvements)</small>	KIND <small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small>	EXACT LOCATION	ASSESSED VALUE	CURRENT FAIR MARKET VALUE	ACQUISITION		ACQUISITION COST
					YEAR	MODE	

**Subtotal:** \_\_\_\_\_

##### b. Personal Properties\*

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUNT

**Subtotal :** \_\_\_\_\_



**2. LIABILITIES\***

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE

**TOTAL LIABILITIES:** \_\_\_\_\_

**NET WORTH : Total Assets less Total Liabilities =** \_\_\_\_\_

\* Additional sheet/s may be used, if necessary.

**BUSINESS INTERESTS AND FINANCIAL CONNECTIONS**

*(of Declarant /Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household)*

I/ We do not have any business interest or financial connection.

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION

**RELATIVES IN THE GOVERNMENT SERVICE**

*(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)*

I/ We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS

I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated are names of my relatives in the government within the fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the Bureau of Internal Revenue such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in my household covering previous years to include the year I first assumed office in government.

Date: \_\_\_\_\_

\_\_\_\_\_  
*(Signature of Declarant)*

\_\_\_\_\_  
*(Signature of Co-Declarant/ Spouse)*

Government Issued ID: \_\_\_\_\_  
ID No.: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

Government Issued ID: \_\_\_\_\_  
ID No.: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of \_\_\_\_\_, affiant exhibiting to me the above-stated government issued identification card.

ENRIQUE D. PANGILINAN