

Republic of the Philippines Department of Education

NATIONAL CAPITAL REGION
SCHOOLS DIVISION OFFICE OF MUNTINLUPA CITY

Office of the Schools Division Superintendent JAN 17 2025

MEMORANDUM

SCHOOLS DIVISION OFFICE PERSONNEL ANNUAL SUBMISSION OF SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH (SALN) AS OF DECEMBER 31, 2024

To: OIC-Assistant Schools Division Superintendent

Chief Education Supervisor, Curriculum Implementation Division

OIC-Chief Education Supervisor, School Governance and Operations Division

Public Elementary and Secondary School Heads

Administrative Officer V All Others Concerned

- 1. As mandated by the Republic Act 6713, all public officials and employees must file their Statement of Assets, Liabilities, and Net Worth (SALN) and disclose any business interests and financial ties annually. This requirement, under oath, is designed to uphold transparency and accountability in government. Compliance to the said requirement is necessary for the eligibility in receiving benefits such as Mid-Year Bonus (MYB) and Performance-Based Bonus (PBB).
- 2. To fulfill such obligation, all SDO Personnel, including those who are on leave of absence and are still in the service as of December 31, 2024, are required to accomplish and submit a duly notarized SALN using the attached form. The submission must include two (2) sets: one copy for the Office of the Ombudsman and one copy for the Division Personnel 201 File.
- 3. Moreover, the personnel in-charge per unit (OSDS, SGOD, and CID) must also submit a scanned copy of the duly notarized SALN of their unit to the Personnel Unit, c/o of Ms. Shiela Rose H. Bachoco, via this email: recruitment.sdomuntinlupa@deped.gov.ph, on or before January 31, 2025.
- 4. Immediate and wide dissemination of, and compliance to this Memorandum are desired.

For:

VIOLETA M. GONZALES

Assistant Schools Division Superintendent Officer-in-Charge Office of the Schools Division Superintendent

By:

MA. REGAELE Á. OLARTE

OIC-Chief Education Supervisor, SGOD Officer-in-Charge

Office of the Assistant Schools Division Superintendent

References: Republic Act No. 6713
CSC Resolution No. 1701077 s. 2017
To be indicated in the Perpetual of Index under the following subjects:
SUBMISSION POLICY REPORTS

SRHB/AMF- SDO ANNUAL SUBMISSION OF SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH (SALN) AS OF DECEMBER 31, 2024
____/January 13, 2025



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						Promulgat	ed on January 23, 2015
	SWORN STA	TEMENT OF A	ASSETS, LIA	BILITIES AN	D NET	WORT	H
		As of	Required by R.A. 6	713)			
		· ·					
Note	e: Husband and wife wh	no are both public offic pint Filing	ials and employee:	s may file the required ling Not Ap			separatety.
DECLARANT.				POSITION:			
DECLARANT:	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE:			
ADDRESS:				OFFICE ADDRESS:			
SPOUSE:				POSITION:			
	(Family Name)	(First Name)	(M.I.)	AGENCY/OFFICE: OFFICE ADDRESS:			
UNMARRI	ED CHILDREN BE		(18) YEARS C	F AGE LIVING I	N DEC		HOUSEHOLD

1. ASSETS a. Real	l Properties*	those of the spou years of age	se and unmarr living in declar	D NETWORTH ied children belou ant's household) CURRENT FAIR MARKET VALUE		een (18)	ACQUISITION COST
lot, condominium and improvements)	commercial, industrial, agricultural and mixed use)	rial,		the Tax Declaration of	YEAR MODE		
	18					Subtotal:	
b. Person	nal Properties*	RIPTION		YEAR A	CQUIRE		ACQUISITION
				Control of the barrier			

DESCRIPTION	YEAR ACQUIRED	ACQUISITION COST/AMOUN
	Subtotal:	

Page 1 of ___

^{*} Additional sheet/s may be used, if necessary.

2 LIARILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
	-	
	TOTAL I	JABILITIES:
	NET WORTH : Total Assets less Total	
* 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)

 \square 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:	Government Issued ID:
ID No.:	ID No.:
Date Issued:	Date Issued:
SUBSCRIBED AND SWORN to before me this _ government issued identification card.	day of, affiant exhibiting to me the above-state
	(Person Administering Oath)
Pag	e 2 of