



Republic of the Philippines  
Department of Education  
Cordillera Administrative Region  
**DIVISION OF BAGUIO CITY**  
# 82 Military Cut-Off, Baguio City  
Tel. No.: (074) 442-7819



DEPED DIVISION OF BAGUIO CITY

FEB 01 2018

RELEASED



January 31, 2018

**SUBMISSION OF SWORN STATEMENT OF ASSETS AND LIABILITIES (SALN) 2017**

DIVISION MEMORANDUM  
No. 50, s. 2018

**TO:** All Office of the Schools Division Superintendent  
Curriculum Implementation Division  
School Governance & Operation Division  
Public Elementary and Secondary School Principals/School Heads  
Head Teachers/Department Heads  
All Public Elementary and Secondary Teachers  
Non- Teaching Personnel  
All Others Concerned

1. Pursuant to Republic Act No.6713 which mandates all public officers and employees to declare annually a true, detailed and sworn statement of their assets, liabilities and net worth, **all the permanent DepEd Employees** (teaching and non teaching personnel) are required to submit their SALN as of December 31, 2017 in **triplicate copies** (in separate folders) on or before **March 31, 2018**.
2. Attached herewith is the prescribed form of Sworn Statement of Asset and Liabilities as required by R.A. 6713.
3. Anent to this, the school heads shall consolidate the SALN 2017 and shall attach a **"Summary of the List of Teachers and Non Teaching Personnel"** of their respective school to be submitted to the personnel section of DepEd, Baguio City Division Office.
4. Immediate dissemination and strict compliance of this memorandum to all concerned is enjoined.

  
**FEDERICO P. MARTIN, Ed. D., C. Ed. D., CESO V**  
Schools Division Superintendent 

## 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*

|   |  |
|---|--|
| <b>DECLARANT:</b><br>_____<br>(Family Name)                      (First Name)                      (M.I.) | <b>POSITION:</b> _____<br><b>AGENCY/OFFICE:</b> _____<br><b>OFFICE ADDRESS:</b> _____<br>_____ |
| <b>ADDRESS:</b><br>_____<br>_____   | <b>OFFICE ADDRESS:</b><br>_____<br>_____   |
| <b>SPOUSE:</b><br>_____<br>(Family Name)                      (First Name)                      (M.I.)    | <b>POSITION:</b> _____<br><b>AGENCY/OFFICE:</b> _____<br><b>OFFICE ADDRESS:</b> _____<br>_____ |

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

| NAME  | DATE OF BIRTH | AGE   |
|-------|---------------|-------|
| _____ | _____         | _____ |
| _____ | _____         | _____ |
| _____ | _____         | _____ |
| _____ | _____         | _____ |

### ASSETS, LIABILITIES AND NETWORTH

*(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<br><small>(e.g. lot, house and lot, condominium and improvements)</small> | KIND<br><small>(e.g. residential, commercial, industrial, agricultural and mixed use)</small> | EXACT LOCATION | ASSESSED VALUE                                     | CURRENT FAIR MARKET VALUE | ACQUISITION |      | ACQUISITION COST |
|---|---|----------------|--|---------------------------|-------------|------|------------------|
|   |   |                | (As found in the Tax Declaration of Real Property) |                           | YEAR        | MODE |                  |
|   |   |                |  |                           |             |      |                  |
|   |   |                |  |                           |             |      |                  |
|   |   |                |  |                           |             |      |                  |
|   |   |                |  |                           |             |      |                  |

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

##### b. Personal Properties\*

| DESCRIPTION | YEAR ACQUIRED | ACQUISITION COST/AMOUNT |
|-------------|---------------|-------------------------|
|             |               |                         |
|             |               |                         |
|             |               |                         |
|             |               |                         |

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

**TOTAL ASSETS (a+b):** \_\_\_\_\_

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

**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.

\_\_\_\_\_  
(Person Administering Oath)